



Textiles  
Human  
Resources  
Council

Conseil des  
ressources humaines  
de l'industrie  
du textile



## THRC – Harvard Supervisory Certificate

### Participant Information

Please send this form to:

Julia Miles, Manager, Administration & Accounting, Textiles Human Resources Council  
By Fax: (613) 230-1270 OR By Email: [julia.miles@thrc-crhit.org](mailto:julia.miles@thrc-crhit.org)

#### A. Participant Information

Name: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Have you ever used the *Skills and Learning Portal* before?  Yes  No

Current job title: \_\_\_\_\_ Years of experience: \_\_\_\_\_

Previous position (1): \_\_\_\_\_ Years of experience: \_\_\_\_\_

Previous position (2): \_\_\_\_\_ Years of experience: \_\_\_\_\_

Years of experience in a supervisor role: \_\_\_\_\_

Number of employees currently supervising: \_\_\_\_\_

Area(s) of expertise within industry: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Area(s) of personal interest: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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## B. Education / Experience

High School / GED

University / College

Area of study: \_\_\_\_\_

Trade School / Certificate

Area of study: \_\_\_\_\_

Other (specialized training):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## C. Manager Information

Immediate manager's name: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

## D. Company Information

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City / Province: \_\_\_\_\_

\_\_\_\_\_  
*Participant signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Manager signature*

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