

## **CNA Employment and Training Program Questionnaire**

**To be completed by CNA Participating Bands Staff**  
(Band Managers, Social Development Workers or Education Coordinators)

**\*\*Please return to Lisa Luscombe – Employment and Training Coordinator @  
lluscombe@cna-trust.ca\*\***

**Name:**

**Position:**

**Band:**

**Email:**

**1. What does your community need from CNA Employment and Training?**

**2. What type of training do you think your community members need?**

**3. What are the employment and training barriers for your community members?**

**4. What do you think the CNA Employment and Training needs to improve on?**