

Multicultural Association of Fredericton Inc.
Needs Assessment (revised May 29, 2012)

LAST NAME (SURNAME): _____ First name: _____

MCAF Services

Do you know about Settlement Services?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about French and English classes?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about the Community connections program?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about Employment services and changes since May 2012?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about children and youth programs?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about the Newcomer Computer Learning Center?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about different MCAF community initiatives?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about the MCAF membership? (<i>give the form</i>)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Government Service:

Do you know what a SIN (Social Insurance Number) card is and what you need it for?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know what Child Tax Benefit is?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know what NB Services is?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know what NB Medicare is and what you need it for?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about Revenue Canada and Canadian Tax System?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Financial Information:

Are you familiar with Canadian Currency?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to pay your bills?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know where your bank account is?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to take money out of your account (withdrawal)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to put money into your bank account (deposit)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to budget your money?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know what Income Tax is?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you understand the 13% sales tax?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know the advantages and the disadvantages of credit cards?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Renting Accommodation

Are you living in a house or an apartment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to find an apartment or a house?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know that certain utilities are not always included?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know that before you sign the lease you have an inspection?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any Inspection Findings that have been reported and not fixed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to reach your landlord?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you aware that you have a lease obligation in your apartment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How long is your lease?	
Do you have a copy of the lease?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to pay your rent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know when to pay your rent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to pay your Utilities? (power/lights)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know what Co-op Housing is?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Would you like to apply for Co-op housing?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know what NB Subsidies is?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to let people know your new address when you move?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Mail - Post Canada

Do you know where to find postal outlets?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to send mail?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to address the envelope?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how much stamps cost? Do you know where to buy stamps?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Apartment Living

Are you used to living in an apartment/house in the winter?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use appliances (refrigerator, stove, oven, and dishwasher)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to dispose of your garbage and your recycling?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Thermostat use. Do you know how to turn up the heat?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know that it is unacceptable to make noise late at night?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a common space in your building?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know what to do if the fire alarm goes off?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a smoke detector in your apartment? Do you know how to use it (in case of fire do you know where the fire extinguisher is)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know that you have to change the smoke detector batteries twice a year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use the fire extinguisher in your apartment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is your building a secure building?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have an intercom system?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use the intercom system?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Telephone

Do you have a residential phone?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you who to contact to arrange for this service?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use your home telephone?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you know that local calls are included in your monthly usage charge and that long distance calls are expensive and will be an extra charge on your monthly bill?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to make long distance calls?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to make long distance calls and get a discount?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a phone book?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use the phone book?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use a long distance phone card?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know where to purchase a long distance phone card?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use a pay phone?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to get a cell phone?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know that different cell phone plans (contract or no contract) have different costs?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Health Care System

Do you have your Medicare Card?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you and your family receive all necessary immunization requested?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use your NB Medicare card?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have other insurance coverage?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a family doctor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know the role of the family doctor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to register to get a family doctor?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know the role of the walk-in clinics and after hour clinics?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about the Emergency room and how to use it?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Do you know how to go to the hospital?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know that you have to pay for ambulance rides?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know you can use a taxi 24 hours a day for non life threatening health problems?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to make dental or eye doctor appointments?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know what to do in case of an emergency (accident, fire, medical, crime, etc.)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know when to use 911?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Education and Child Care

Do you know about the New Brunswick school system for children?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you have school age children, have you registered and received an orientation on school rules?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you familiar with the length of the school year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you familiar with Canadian, New Brunswick and school holidays?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about the cost of attending school, school supplies, etc.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about daycares and the cost of one?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Local Transportation

Do you know how to ride the bus?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a student ID card (MCAF/UNB/STU/etc.)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to get a student monthly bus pass?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have a copy of bus routes and schedule?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use it?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to get a taxi?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you aware of the price difference between public transportation and taxis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to get a driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Shopping

Do you know how to use your debit card or/and your credit card?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know the different ways to pay for things at the store?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know what to buy in order to be comfortable in the winter?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to compare the prices of products in a store?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have furniture in your apartment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to get furniture?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to use store sales, coupons and flyers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to find out about store policies and exchange/refunds?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know where to find second hand stores?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know the Salvation Army thrift store and the Food Bank?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know that certain businesses (grocery stores, hotel, restaurant, Playhouse, etc.) offer special pricing if you are a student or over 60 years old?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know where to find ethno-cultural food and items?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know where to buy food?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to budget for food?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Cooking

Do you have everything to cook at home (utensils, cooking pot, dishes, etc.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to cook frozen food (less expensive)?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Recreation and Leisure?

Do you have a favorite sport?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know how to join clubs and sport groups?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you know about the local art community?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Culture

Are you familiar with Canadian and New Brunswick holidays?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you belong to Faith Community?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Which Ethnic group do you identify with?	
Do you have contact with your ethno specific community?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you understand the term "Gender Orientation"?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Which gender do you identify with?	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Do you know of resources available to you in the community?	<input type="checkbox"/> Yes <input type="checkbox"/> No

MCAF worker: _____ Interpreter: _____

Newcomer signature: _____ Date: _____