

APPLICATION FOR EMPLOYMENT

We consider applicants without regard to ancestry, age, sex (including pregnancy), family status, sexual orientation, gender identity, and physical or mental disability.

PERSONAL DATA

LAST NAME	FIRST NAME	MIDDLE NAME
PRESENT ADDRESS		
CITY	PROVINCE	POSTAL CODE
HOME TELEPHONE	BUSINESS TELEPHONE	
ARE YOU LEGALLY ENTITLED TO WORK IN CANADA?	HAVE YOU WORKED HERE BEFORE? IF Yes, WHEN?	
DO YOU WANT TO WORK -FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> TEMPORARY <input type="checkbox"/>		
WHAT TYPE OF WORK ARE YOU INTERESTED IN DOING?		

EDUCATION

LEVEL COMPLETED	SECONDARY SCHOOL					COLLEGE OR UNIVERSITY					GRADUATE OR PROFESSIONAL				
	9	10	11	12	13	1	2	3	4	5	1	2	3	4	5
CERTIFICATES, DIPLOMAS, DEGREES OBTAINED															
COURSE OF STUDY															
LIST ANY SPECIALIZED TRAINING, APPRENTICE SKILLS, AWARDS, PROFESSIONAL DESIGNATIONS, AND OTHER EDUCATION															
<i>Education levels achieved and degrees obtained are subject to verification if an offer of employment is extended.</i>															

WORK HISTORY (LIST IN ORDER STARTING WITH YOUR PRESENT OR LAST JOB)

PRESENT OR LAST EMPLOYER	ADDRESS
TYPE OF BUSINESS	PHONE NUMBER
YOUR JOB TITLE	PERIOD EMPLOYED From (Mo/Yr) To (Mo/Yr)
NAME AND TITLE OF IMMEDIATE SUPERVISOR	REASON FOR LEAVING
DESCRIBE JOB DUTIES AND RESPONSIBILITIES	

PRESENT OR LAST EMPLOYER	ADDRESS
TYPE OF BUSINESS	PHONE NUMBER
YOUR JOB TITLE	PERIOD EMPLOYED From (Mo/Yr) To (Mo/Yr)
NAME AND TITLE OF IMMEDIATE SUPERVISOR	REASON FOR LEAVING
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NAME AND TITLE OF IMMEDIATE SUPERVISOR	REASON FOR LEAVING
DESCRIBE JOB DUTIES AND RESPONSIBILITIES	
MAY WE CONTACT YOUR PRESENT OR LAST EMPLOYER FOR REFERENCE? YES <input type="checkbox"/> NO <input type="checkbox"/>	MAY WE CONTACT YOUR PREVIOUS EMPLOYERS FOR REFERENCE? YES <input type="checkbox"/> NO <input type="checkbox"/>

PLEASE READ CAREFULLY

The foregoing statements are correct to the best of my knowledge. I understand that any misrepresentation may disqualify me from employment or be cause for my dismissal. If considered for employment, I agree to the verification of my stated background, the submission of a recent criminal record check and the serving of an initial probationary period. I agree to abide by all rules and regulations of the Company.

Applicant Signature _____

Date _____