

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Name	<div style="display: flex; justify-content: space-between;"> (Last) (Given) </div>		
Address	Street	Appt. No.	Phone number ()
	(City)	(Province)	(Postal Code)
			(home)
			()
			(work)
Are you legally eligible to work in Canada?			Yes <input type="checkbox"/> No <input type="checkbox"/>

EDUCATIONAL BACKGROUND

		Length of Course	Graduated	Diploma, Degree, Licence
High School			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Community College			Yes <input type="checkbox"/> No <input type="checkbox"/>	
Trade or Business School			Yes <input type="checkbox"/> No <input type="checkbox"/>	
University			Yes <input type="checkbox"/> No <input type="checkbox"/>	

EMPLOYMENT HISTORY (Name present employer first)

Company Name		Employed From:	Salary From:	Position:
Address				Supervisor:
Reason for leaving		To:	To:	

Company Name		Employed From:	Salary From:	Position:
Address				Supervisor:
Reason for leaving		To:	To:	

Company Name		Employed From:	Salary From:	Position:
Address				Supervisor:
Reason for leaving		To:	To:	

May we contact the employers listed above? If not, indicate below which one(s) you do not wish contacted.

REFERENCES

Name		Address		Telephone	()
Occupation				Years Known	

Name		Address		Telephone	()
Occupation				Years Known	

Name		Address		Telephone	()
Occupation				Years Known	

GENERAL INFORMATION (Do not answer any questions that may, in your opinion, infringe on your human rights)

Do you realize its mandatory to work some Saturdays during the busy season? Are you willing to work Saturdays?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
What machines can you operate competently?		
What special qualifications do you have?		
Describe any of your skills, experience, and training that relate to the position being applied for:		
Do you own a vehicle, or have use of one?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Number of Years Driving:		
Do you have any convictions on your drivers record? If so, please specify below:		
DATE AVAILABLE TO BEGIN WORK	POSITION BEING APPLIED FOR	
PLEASE READ CAREFULLY		
I authorize investigation of all statements contained in this application and I hereby certify, that to the best of my knowledge and belief, the answers given in this statement by me are correct. I understand that any false information or consequential omission is cause for immediate dismissal.		
Date: _____	Signature: _____	

FOR OFFICE USE ONLY Interviewer's comments