

APPLICATION FOR EMPLOYMENT

PLEASE PRINT PLAINLY

Date: _____

Type of Work desired: _____

PERSONAL:

Name: _____
Last First Middle Initial

Present Address: _____
No. Street Community Province Code

Telephone No.: _____
Area Code

Are there any other experiences, skills, or capabilities, which you feel would especially qualify you for work with us? _____

If hired, on what date will you be available to start work? _____

If hired, do you have a reliable means of transportation to get to work? _____

Do you require any job accommodations or adaptations to perform tasks?

Do have any physical limitations, which might impact your performance in the job(s) you are applying for? ☐ No ☐ Yes

If yes, explain which functions of the job you cannot perform or need support for.

EDUCATIONAL BACKGROUND:

TYPE OF SCHOOL	NAME AND ADDRESS	FROM	TO	GRADUATED	COURSE/ MAJOR
HIGH SCHOOL				☐ YES ☐ NO	
COLLEGE				☐ YES ☐ NO	
POST GRADUATE				☐ YES ☐ NO	
BUSINESS OR TRADE				☐ YES ☐ NO	
OTHER				☐ YES ☐ NO	

PRIOR WORK HISTORY (LIST IN ORDER, LAST OR PRESENT EMPLOYER FIRST)

DATES		NAME AND ADDRESS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		

Describe in detail the work you did.

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DATES		NAME AND ADDRESS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		
Describe in detail the work you did.						

DATES		NAME AND ADDRESS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		
Describe in detail the work you did.						

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

PERSONAL REFERENCES

Give the names of at least 3 persons who can supply information pertinent to your job performance (excluding former employees or relatives).

NAME AND OCCUPATION	ADDRESS	PHONE NO
1.		
2.		
3.		
4.		
5.		

PLEASE READ CAREFULLY APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that, if employed, falsified statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant: _____

Date: _____