



APPLICATION FOR EMPLOYMENT

PLEASE PRINT

Name _____
Last First Middle

Present Address _____
Number Street City Province Postal Code

Previous Address _____
Number Street City Province Postal Code

Home Telephone Number _____ Other Phone Number _____

e-mail address: _____

Are you of legal working age (16)? _____

Are you a student? _____

Are you legally able to work in Canada? _____

Have you ever been convicted of a crime that you have not been pardoned for? _____

Education:	Name of School	Address	Years Attended	Graduation Year
<i>Grades 1-8</i>				
<i>Grades 9-12</i>				
<i>Other</i>				

Hobbies and Interests:

- a) _____
- b) _____
- c) _____

Are you able to work overtime? If no, state reason: _____

Are you able to work shift work? If no, state reason: _____

EMPLOYMENT RECORD: Beginning with most recent employment.

Employer Name	Address	Date Hired	Date Left	Supervisor
<i>Duties:</i>				
<i>Reason for leaving:</i>				
Employer Name	Address	Date Hired	Date Left	Supervisor
<i>Duties:</i>				
<i>Reason for leaving:</i>				
Employer Name	Address	Date Hired	Date Left	Supervisor
<i>Duties:</i>				
<i>Reason for leaving:</i>				

References – List two non-relatives whom we may refer

Name	Address	Telephone Number	Years Known	Position
f	df			

Person to contact in case of an Emergency

Name	Address	Telephone Number	Relationship to you

Please read & sign below:

I hereby declare, to the best of my knowledge, that all of the foregoing information is true and I understand that any falsification of same be cause for dismissal.

I further understand that it is a condition of employment that I shall be required, when eligible, to join in the company’s pension plan, medical plan, and group insurance plan for employees.

If hired, I must provided SIN & banking information (for Direct Deposit) on or before time of Orientation.

Signature of Applicant: _____

Date: _____