

APPLICATION FOR EMPLOYMENT

(PLEASE PRINT PLAINLY)

The Human Rights Code prohibits discrimination in employment because of sex, age, race, colour, religion, national origin, marital status, nationality, ancestry, place of origin, political belief, family status and physical handicap.

Date: _____

PERSONAL

Name _____
Last First Middle Initial

Present address _____
No. Street City Province Code

Telephone No. (Area) _____

Are you legally eligible to work in Canada? Yes No

Job(s) applied for 1. _____ Rate of pay expected \$ _____ per _____
2. _____ Rate of pay expected \$ _____ per _____

How did you learn of this opening? _____

Do you want to work Full-time or Part-time. Specify days and hours if part-time _____

Have you worked for us before? _____ If yes, when? _____

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

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

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

Do you have any physical limitations which might interfere with or limit your performance in the job(s) you are applying for? No Yes. If yes, explain which functions of the job you can not perform.

Are you bondable? No Yes

EDUCATIONAL BACKGROUND

TYPE OF SCHOOL	NAME AND ADDRESS	FROM	TO	Graduated	COURSE OR MAJOR
HIGH SCHOOL				<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE				<input type="checkbox"/> Yes <input type="checkbox"/> No	
POST GRADUATE				<input type="checkbox"/> Yes <input type="checkbox"/> No	
BUSINESS OR TRADE				<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER				<input type="checkbox"/> Yes <input type="checkbox"/> 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.						

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.						

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 NUMBER
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____
5 _____	_____	_____

Occasionally the form of an application blank makes it difficult for an individual to adequately summarize his complete background. To assist us in finding the proper position for you in our Company, use the space below to summarize any additional information necessary to describe your full qualifications.

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with this Company will be based only on your merit and on no other consideration.

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 _____