



1030 Fountain St. N. Cambridge Ontario N3H 4R7
 T: (519) 623-6223 F: (519) 623-1122

EMPLOYMENT APPLICATION

*please print clearly

Section # 1 Personal Information	First Name:	Last Name:	Middle Name:
	Present Address:		
	City:	Province:	Postal Code:
	Home Telephone:	Work Telephone:	Other Form of Contact:
	Are you employed now? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you legally entitled to work in Canada? Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you ever been convicted of a criminal offence for which a pardon has not been granted? Yes <input type="checkbox"/> No <input type="checkbox"/>

Section # 2 Job Information	Have you worked here before? If yes, when?	If hired, when can you start?	Do you have a reliable means of transportation to get to work? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Do you want to work? Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/>	What position are you applying for?	

Section # 3 Education	School	Last Grade or Degree Completed	School	Last Grade or Degree Completed
	Elementary		College	
	High school		Bus./Trade	
	University		Other	
	Certificates, diplomas and/or degrees obtained:			
List any specialized training, apprentice skills, awards, professional designations and other education:				

Section # 4 Languages	English:	French:	Other:
	Read: <input type="checkbox"/>	Read: <input type="checkbox"/>	Read: <input type="checkbox"/>
	Speak: <input type="checkbox"/>	Speak: <input type="checkbox"/>	Speak: <input type="checkbox"/>
	Write: <input type="checkbox"/>	Write: <input type="checkbox"/>	Write: <input type="checkbox"/>
Any additional languages:			

Section #	Present or Former Employer:	Address:
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Section # 5.1 Work History	Type of Business:	Job Title(s):	Period Employed	From (mm/yy): To (mm/yy):
	Name & Title of Immediate Supervisor:		Reason for Leaving:	
	Describe Job Duties & Responsibilities:			

Section # 5.2 Work History	Present or Former Employer:		Address:	
	Type of Business:	Job Title(s):	Period Employed	From (mm/yy): To (mm/yy):
	Name & Title of Immediate Supervisor:		Reason for Leaving:	
	Describe Job Duties & Responsibilities:			

Section # 5.3 Work History	Present or Former Employer:		Address:	
	Type of Business:	Job Title(s):	Period Employed	From (mm/yy): To (mm/yy):
	Name & Title of Immediate Supervisor:		Reason for Leaving:	
	Describe Job Duties & Responsibilities:			

Section # 6 Consent	May we contact your present or last employer for reference?		May we contact your previous employers for reference?	
	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	<p>PLEASE READ CAREFULLY</p> <p>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 hired, I agree to abide by all rules and regulations of the Company, including serving an initial probationary period.</p>			
Applicant Signature:		Date (mm/dd/yyyy):		
		___/___/____ ___/___/____		