



APPLICATION FOR EMPLOYMENT

PERSONAL DATA

Name (Last):	First:	Middle:	
Address: (street)	City:	Province:	Postal Code:
Cell phone:	Home Phone:		
	Date available:		
Position Applied for:	Salary Expectation:		
Are you legally entitled to work in Canada?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Would you be willing to work?	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Week-end

WORK HISTORY

Present or Last Employer:			
Worked from:	To:	Salary:	
Address:		Phone#:	
Position held:		Name of supervisor:	
Duties:			
Reason for leaving:			
May we contact the employer?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Present or Last Employer:			
Worked from:	To:	Salary:	
Address:		Phone#:	
Position held:		Name of supervisor:	
Duties:			
Reason for leaving:			
May we contact the employer?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
Present or Last Employer:			
Worked from:	To:	Salary:	
Address:		Phone#:	
Position held:		Name of supervisor:	
Duties:			
Reason for leaving:			
May we contact the employer?		<input type="checkbox"/> YES	<input type="checkbox"/> NO

EDUCATION

	Name	Course/Program	Diploma/Degree	Dates
Elementary/Secondary				
Vocational/Trade School				
College/University				
Post graduate/Other				
Special Courses				

If you are a licensed professional or trade worker, give details:

Province Issued:

SKILLS PROFILE

List area (s) of expertise:	
List duties performed previously:	

Comments or additional information you feel we should know about.:

REFERENCES

Please list 3 work references that are not friends or family

Name	Company	Contact Number	Position