

Position You Are Applying For _____

Desired Salary _____

Date Available for Work: _____

PERSONAL INFORMATION

Last Name _____	First Name _____	Middle _____
Address _____	City _____	Province _____ Postal Code _____
Home Phone: _____	Cell Phone: _____	Email address: _____
Are you a Canadian Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		Social Insurance Number: _____
If not, what is your current status in Canada? _____		

EDUCATION

School Name	Location	Highest Grade Completed	Year	

Other training, certifications or licenses held: _____

EMPLOYMENT

Employer: _____	Pay Rate: _____
Work Phone: _____	Dates Employed: from: _____ to: _____
Address: _____	
City: _____	Province: _____ Postal Code: _____
Position: _____	
Duties Performed: _____	
Supervisors Name and Title: _____	
Reason for leaving: _____	
May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No	

REFERENCES

Name	Title	Company	Phone

Acknowledgement and Authorization

- I certify that all answers given herein are true and complete to the best of my knowledge.
- I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
- In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant _____ Date _____