



|  |  |                              |                             |   |      |
|--|--|------------------------------|-----------------------------|---|------|
| Last Name                              |  | First                        |                             | M.I.  | Date |
| Mailing/Street Address                 |  |                              |                             | Apartment/Unit #  |      |
| City                                   |  | Prov.                        |                             | Postal Code   |      |
| Phone                                  |  | E-mail Address               |                             |   |      |
| Date Available                         |  | Social Ins. No.              |                             | Desired Salary  |      |
| Position Applied for                   |  |                              |                             |   |      |
| Are you a Canadian citizen?            |  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If no, are you authorized to work in Canada? YES <input type="checkbox"/> NO <input type="checkbox"/> |      |
| Have you ever worked for this company? |  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If so, when?  |      |

|             |    |                   |                              |                             |         |
|-------------|----|-------------------|------------------------------|-----------------------------|---------|
| High School |    | Address           |                              |                             |         |
| From        | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Diploma |
| College/    |    | Address           |                              |                             |         |
| From        | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree  |
| Other       |    | Address           |                              |                             |         |
| From        | To | Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree  |

*Please list three professional references.*

|           |  |              |
|-----------|--|--------------|
| Full Name |  | Relationship |
| Company   |  | Phone ( )    |
| Address   |  |              |
| Full Name |  | Relationship |
| Company   |  | Phone ( )    |
| Address   |  |              |
| Full Name |  | Relationship |
| Company   |  | Phone ( )    |
| Address   |  |              |

| PREVIOUS EMPLOYMENT   |                    |                    |  |
|---|--------------------|--------------------|--|
| 1.<br>Company   |                    | Phone ( )          |  |
| Address   |                    | Supervisor         |  |
| Job Title   | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities  |                    |                    |  |
| From  | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |
| 2.<br>Company   |                    | Phone ( )          |  |
| Address   |                    | Supervisor         |  |
| Job Title   | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities  |                    |                    |  |
| From  | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |
| 3.<br>Company   |                    | Phone ( )          |  |
| Address   |                    | Supervisor         |  |
| Job Title   | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities  |                    |                    |  |
| From  | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |

| DISCLAIMER AND SIGNATURE  |      |
|---|------|
| I certify that my answers are true and complete to the best of my knowledge.  |      |
| If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. |      |
| Signature   | Date |