

**APPLICATION  
FOR EMPLOYMENT**

TEL (613) 225-6398  
FAX (613) 225-1681

*Please Print All Information*

Position Applied For: \_\_\_\_\_ Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Email: \_\_\_\_\_

How Did You Learn About This Opening?

Advertisement  Walk-In  Relative: \_\_\_\_\_ Friend: \_\_\_\_\_

You are Available to Work:

Temporary  Part Time  Full Time

Date you can Begin Work: \_\_\_\_\_

Rate of Pay expected: \$ \_\_\_\_\_ per hour

|   |     |    |
|---|-----|----|
| Are you currently employed?   | Yes | No |
| Are you prevented from lawfully becoming employed in this country due to Visa or Immigration status?                                  | Yes | No |
| Have you been convicted of a crime within the last seven (7) years?:<br>(Conviction will not disqualify an applicant from employment) | Yes | No |
| If hired, do you have reliable means of transportation to get to work?  | Yes | No |
| Are you aware of any Health problem that would preclude you from performing the duties of this job,                                   | Yes | No |
| Are you willing to undergo a job-related Medical Examination by a Physician selected by this company?                                 | Yes | No |
| Do you have any objection to providing abstracts of your driving record on request?   | Yes | No |

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**EDUCATION:**

|                  |  |
|------------------|--|
| High School:     |  |
| University:      |  |
| Technical/Other: |  |

**PRIOR WORK HISTORY** (List in order, Last or present employer first)

**CURRENT EMPLOYER**

| Dates                                |    | Name of Employer | Rate of Pay | Reason for Leaving |
|--------------------------------------|----|------------------|-------------|--------------------|
| From                                 | To |                  |             |                    |
|                                      |    |                  |             |                    |
| Describe in detail the work you did. |    |                  |             |                    |

**PREVIOUS EMPLOYER**

| Dates                                |    | Name of Employer | Rate of Pay | Reason for Leaving |
|--------------------------------------|----|------------------|-------------|--------------------|
| From                                 | To |                  |             |                    |
|                                      |    |                  |             |                    |
| Describe in detail the work you did. |    |                  |             |                    |

|  |     |    |
|--|-----|----|
| May we contact the employers listed above?   | Yes | No |
| If not, indicate which one you do not wish us to contact.  |     |    |
| Have you had any injury or illness in the last 10 years?   | Yes | No |
| If yes, describe.  |     |    |
| Have you had any automobile accident during the last 3 years?  | Yes | No |
| If yes, describe.  |     |    |
| Have you had any convictions arising out of the use, ownership or operations of any motor vehicle during the past 3 years? | Yes | No |
| If yes, describe.  |     |    |

*Please Print All Information*

**PERSONAL REFERENCES**

Give the names of at least 2 persons who can supply information pertinent to your job performance (excluding former employers or relatives)

| Name | Occupation | Phone Number |
|------|------------|--------------|
| 1.   |            |              |
| 2.   |            |              |

Occasionally the form of an application makes it difficult for an individual to adequately summarize their 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.

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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.

**APPLICANT'S STATEMENT**

*Please read carefully before signing*

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application as may be necessary to arrive at an employment decision. I hereby release the Company and any former employer and any third party from any liability whatsoever that may be imposed as a result of the release of such information. Should I be employed by the Company any false or misleading information will result in my employment being immediately terminated.

SIGNATURE OF APPLICANT: \_\_\_\_\_