



**CONFIDENTIAL JOB APPLICATION**

Position applied for: \_\_\_\_\_

**Personal Data**

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Name (last, first, middle) \_\_\_\_\_ Date: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Message Phone: \_\_\_\_\_

If employed, can you produce proof of Canadian citizenship? Yes  No  N/A

Birthdate: \_\_\_\_\_ Social Insurance No: \_\_\_\_\_

**Education Record**

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High School: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Grade Level Completed: \_\_\_\_\_

College/University: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Diplomas/Degrees Earned: \_\_\_\_\_

Trade or Technical School: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Diplomas/Degrees Earned: \_\_\_\_\_

**Personal Data**

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Have you been convicted of a crime (other than traffic violations) or been imprisoned during the last seven years? A conviction will not necessarily bar you from employment. Yes  No

Explain: \_\_\_\_\_

Do you have any physical or mental disability that may limit your performance in the job you are applying for? If so, what can be done to accommodate your limitation? \_\_\_\_\_

## Employment History

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1. Employer: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Beginning Wage: \_\_\_\_\_ Ending Wage: \_\_\_\_\_

Title/duties: \_\_\_\_\_

Supervisor: \_\_\_\_\_

2. Employer: \_\_\_\_\_ Dates of Employment: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Beginning Wage: \_\_\_\_\_ Ending Wage: \_\_\_\_\_

Title/duties: \_\_\_\_\_

Supervisor: \_\_\_\_\_

## Reference

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List a reference who is familiar with your work and has worked directly with you: \_\_\_\_\_

Reference: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Relationship: \_\_\_\_\_

## In Case of Emergency - Contact

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Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Relationship: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_