



# APPLICATION FOR EMPLOYMENT

570 Welland Avenue,  
St. Catharines, ON  
L2M 5V6

## GENERAL INFORMATION

### IDENTIFICATION:

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

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

Telephone No. \_\_\_\_\_

### ADDRESS:

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

Apt/Unit #: \_\_\_\_\_

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

Postal Code: \_\_\_\_\_

### POSITION:

What position are you applying for? \_\_\_\_\_

Expected Rate of Pay \$ \_\_\_\_\_

If your application is considered favourable, when can you commence work? \_\_\_\_\_

Are you legally entitled to work in Canada Yes \_\_\_ No \_\_\_

Can you understand English Yes \_\_\_ No \_\_\_

Can you read English Yes \_\_\_ No \_\_\_

Can you write English Yes \_\_\_ No \_\_\_

Are you willing to work shiftwork? Yes \_\_\_ No \_\_\_

Hours of availability for work (place a circle around applicable days to indicate you are available)

Days:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Aft.	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Nights	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

## RECORD OF EDUCATION

### SCHOOL

### YEARS

### LAST LEVEL ACHIEVED

Secondary: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Other Educational Achievements (specify): \_\_\_\_\_

\_\_\_\_\_

**RECORD OF EMPLOYMENT**

YEAR                      COMPANY                                      POSITION                      REASON FOR LEAVING  
\_\_\_\_\_

Supervisors' name and title \_\_\_\_\_

May we contact this employer? Yes \_\_\_\_ No \_\_\_\_

YEAR                      COMPANY                                      POSITION                      REASON FOR LEAVING  
\_\_\_\_\_

Supervisors' name and title \_\_\_\_\_

May we contact this employer? Yes \_\_\_\_ No \_\_\_\_

YEAR                      COMPANY                                      POSITION                      REASON FOR LEAVING  
\_\_\_\_\_

Supervisors' name and title \_\_\_\_\_

May we contact this employer? Yes \_\_\_\_ No \_\_\_\_

YEAR                      COMPANY                                      POSITION                      REASON FOR LEAVING  
\_\_\_\_\_

Supervisors' name and title \_\_\_\_\_

May we contact this employer? Yes \_\_\_\_ No \_\_\_\_

---

**PERSONAL REFERENCES**

NAME	TELEPHONE NO.	RELATION	BEST TIME TO CONTACT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

---

*Here is why, in just a few words, I want the above mentioned job.*

DATE OF APPLICATION (M/D/Y) \_\_\_\_\_ SIGNATURE \_\_\_\_\_