APPLICATION SCREENING FORM



| Part 1 – Position Informat | ion (Please confirm | the Advertisement | Number and Position | Title for the p | osition | you are | applyir | ng to). | | |
|--|---------------------|---------------------------------|--|------------------------------|---------|---|---|---------|--|--|
| Advertisement Number: | F | Position Title: | | | | | | | | |
| Part 2 – Applicant Information | | | | | | | | | | |
| Legal First Name: | | | Last Name: | | | | | | | |
| Preferred Name: | | | | | | | | | | |
| Email: | | | Phone Number: (i.e. 204-123-4567) | | | | | | | |
| Mailing Address Line 1: (i.e. Street Name) | Suite No. Box | | | Suite No./F Box | P.O. | | | | | |
| Mailing Address Line 2: | | | | Postal Cod (i.e. A1A 1A1) | | | | | | |
| City: | - | Province: i.e. MB for Manitoba) | | Country: (i.e. CA for Car | nada) | | | | | |
| Have you been previously employed by the Manitoba government? | | | | | | | ☐ YES ☐ NO | | | |
| Are you currently employed by the Manitoba government? | | | | | | ☐ YES* ☐ NO | | | | |
| *If you are currently employed with the Manitoba government in a term, regular or departmental position please provide your Employee Number: | | | | | | | | | | |
| Are you legally entitled to work in Canada?* | | | | | | ☐ YES ☐ NO | | | | |
| *To be legally entitled to work in Canada, you must be either a Canadian citizen, permanent resident or hold a valid work permit. | | | | | | | | | | |
| Are you bilingual (French/English)? Further assessment of written and verbal abilities may be required. | | | | | | | □ N |) | | |
| Part 3 – Voluntary Declarations (Completion of this section is voluntary) | | | | | | | | | | |
| Employment Equity Declaration The Manitoba government recognizes the importance of building an exemplary public service reflective of the citizens it serves, where diverse abilities, backgrounds, cultures, identities, languages and perspectives drives a high standard of service and innovation. The Manitoba government supports equitable employment practices and promotes representation of designated groups (women, Indigenous people, visible minorities, persons with disabilities). For further information please visit: https://www.manitoba.ca/csc/policyman/eestaff.html | | | | | | | Please select all boxes that apply: Women Indigenous people Visible minorities Persons with disabilities | | | |
| Veterans' Preference Consideration | | | | | | | | inition | | |
| The Manitoba government recognizes the contribution of individuals to national security, either serving or losing a spouse or common-law partner as a result of service, by assisting them in securing employment. The Civil Service Act defines veteran for this purpose under Section 14(2) (a)-(d). To view this definition please visit: https://web2.gov.mb.ca/laws/statutes/ccsm/c110e.php For further information on veteran's status as a factor in the staffing process please visit: https://www.manitoba.ca/csc/policyman/veterans.html | | | | | | Do you meet the definition for veterans and wish to be granted veterans' preference consideration: Yes No | | | | |
| Part 4 – Required Declara | tion | | | | | | | | | |
| By checking "yes" in the adjace | | | | ion is | | | | | | |
| accurate and complete to the best of my knowledge as of the date indicated below. I understand that falsified or misleading statements and omissions will result in rejection of this application and, if employed, may be cause for termination. | | | | | | ☐ YES | | | | |
| | | | | | | | | | | |
| Applicant Name | | Applicant Signa | ature | | Date | e | | | | |
| Please submit this application screening form along with any other required documents outlined in the job advertisement | | | | | | | | | | |
| (i.e. resume, cover letter, etc.). We thank all who apply and advise that only those selected for further consideration will be contacted. | | | | | | | | | | |

This information is available in alternate formats upon request.

APPLICATION SCREENING FORM



| Part 5 – Conditions of Employment (Completion of this section is mandatory) | | | | | | | | | |
|--|--|------------------------------|-------------------------|--|--|--|--|--|--|
| Please check to confirm whether you meet the fo | llowing Conditions of Employment: | | | | | | | | |
| Must be legally entitled to work in Canada (must be a | YES | NO | | | | | | | |
| | | YES | NO | | | | | | |
| | YES | NO | | | | | | | |
| | YES | NO | | | | | | | |
| | | YES | NO | | | | | | |
| | | YES | NO | | | | | | |
| Part 6 - Screening | | | | | | | | | |
| For each of the screening criteria for this position, describe experience. Experience can include work, volunteer and/or for candidates selected for further assessment. | how you meet the criteria, using significant exa educational experience. Additional criteria will | amples from y be reviewed | our at a later stage | | | | | | |
| | Describe how you meet each screening criterion, using specific examples as appropriate. | | | | | | | | |
| Screening Criterion | You must not exceed a maximum of 200 words per screening criterion. | | | | | | | | |
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Please submit this application screening form along with any other required documents outlined in the job advertisement (i.e. resume, cover letter, etc.).

We thank all who apply and advise that only those selected for further consideration will be contacted.

This information is available in alternate formats upon request.