

# Job Referral Service (JRS)

## Employment History

**Please indicate:**    New Registration    Registration Renewal   Your Reference # \_\_\_\_\_

Name \_\_\_\_\_ SIN \_\_\_\_\_

Questions with an \* require an answer

Please indicate below, if you have chosen to attach your resume rather than completing the form **or** if you have no work experience to declare:

I am attaching my resume    I have no work experience to declare

<p><b>* Job Title:</b> _____</p> <p><b>* Start Date:</b> _____</p> <p><b>City:</b> _____</p> <p><b>Country:</b> _____</p> <p><b>Hours worked:</b> _____</p>	<p><b>* Employer Name:</b> _____</p> <p><b>End Date:</b> _____</p> <p><b>Province:</b> _____</p> <p><b>Reason for Leaving:</b>   <input type="checkbox"/> Fired   <input type="checkbox"/> Laid Off   <input type="checkbox"/> Maternity/Parental  <input type="checkbox"/> Quit   <input type="checkbox"/> Retired   <input type="checkbox"/> Seasonal/Re-call  <input type="checkbox"/> Sick   <input type="checkbox"/> Term</p>
<b>Job Description:</b>   	
<p><b>* Job Title:</b> _____</p> <p><b>* Start Date:</b> _____</p> <p><b>City:</b> _____</p> <p><b>Country:</b> _____</p> <p><b>Hours worked:</b> _____</p>	<p><b>* Employer Name:</b> _____</p> <p><b>End Date:</b> _____</p> <p><b>Province:</b> _____</p> <p><b>Reason for Leaving:</b>   <input type="checkbox"/> Fired   <input type="checkbox"/> Laid Off   <input type="checkbox"/> Maternity/Parental  <input type="checkbox"/> Quit   <input type="checkbox"/> Retired   <input type="checkbox"/> Seasonal/Re-call  <input type="checkbox"/> Sick   <input type="checkbox"/> Term</p>
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<b>Job Description:</b>   	

Additional sheet attached