# ProvMB Logo_clr APPLICATION FORM

**Alternate formats available upon request.**

You are not required to submit a cover letter, but may be asked to submit a resume, references, or other documentation at a later point if invited for further consideration.

The selection board will rely only on information provided in this form to determine whether a candidate will be invited for further assessment.

|  |  |
| --- | --- |
| **Advertisement #** |  |
| **Job Title** | Nurse |
| **Department(s)** | Manitoba Justice |
| **Location(s)** | Beausejour, MB |

## PART 1: APPLICANT INFORMATION

**(REQUIRED)**

|  |  |  |  |
| --- | --- | --- | --- |
| First Name: | | Family (last) Name: | |
| Phone Number: | | Email: | |
| Address: | | City: | |
| Province: | Country: | | Postal Code: |

I am currently employed with the Manitoba Government in a term, regular or departmental position.

## PART 2: SCREENING CRITERIA

**(REQUIRED)**

*For each of the screening criteria for this position, describe how you meet the criteria, using significant examples from your experience.**Experience can include work, volunteer and/or educational experience.* ***You must not exceed a maximum of 200 words per screening criterion.*** *Additional criteria may be reviewed at a later stage with candidates selected for further assessment.*

|  |  |
| --- | --- |
| **Screening criteria** | **Describe how you meet each screening criterion, using specific examples as appropriate.**  ***You must not exceed a maximum of 200 words per screening criterion.*** |
| 1. Experience performing clinical assessments |  |
| 2. Experience with patient care planning |  |
| Please identify which position you are applying for: GDP or CPN |  |
| Please identify License you have:  Nursing Licensure with the College of Registered Nurses of Manitoba (CRNM) or the College of Registered Psychiatric Nurses of Manitoba (CRPNM). |  |

## PART 3: EMPLOYMENT EQUITY DECLARATION

**(VOLUNTARY)**

*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, persons with disabilities, visible minorities). We encourage applicants to voluntarily self-declare.*

[*Click here for more information on the Employment Equity Policy.*](http://www.gov.mb.ca/csc/policyman/equity.html)

**Please check the boxes that apply to you. Note that you may declare in one or more of the employment equity groups.**

WOMEN

INDIGENOUS PEOPLE

PERSONS WITH DISABILITIES

VISIBLE MINORITIES

## PART 4: VETERANS’ PREFERENCE DECLARATION

**(VOLUNTARY)**

*Veteran status is a consideration in all competitions where it is deemed to be in the public interest. Completion of this veterans’ preference declaration is voluntary.*

[*Click here for more information on the Veterans’ Preference Policy*.](http://www.manitoba.ca/csc/policyman/veterans.html)

I wish to declare Veteran status

## PART 5: APPLICATION DECLARATION

**(REQUIRED)**

|  |  |
| --- | --- |
| By indicating “yes” in the adjacent box, I certify that the information provided on this application 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/no) |  |

Date:

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