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| **Part 1 – Position Information** (Please confirm the Advertisement Number and Position Title for the position you are applying to). | | | | | | | |
| **Advertisement Number:** | 39884 | **Position Title:** | | Direct Service Provider | | | |
| **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./P.O. Box** | |  |
| **Mailing Address Line 2:** |  | | | | **Postal Code:**  (i.e. A1A 1A1) | |  |
| **City:** |  | **Province:**  (i.e. MB for Manitoba) | |  | **Country:**  (i.e. CA for Canada) | |  |
| **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?\***  **\***To be legally entitled to work in Canada, you must be either a Canadian citizen, permanent resident or hold a valid work permit. | | | | | | YES NO | |
| **Are you bilingual (French/English)?** Further assessment of written and verbal abilities may be required. | | | | | | YES NO | |
| **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**  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 Declaration** | | | | | | | |
| By checking “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 | |
|  | | |  | | |  | |
| Applicant Name | | | Applicant Signature | | | Date | |
| 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.** | | | | | | | |

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| **Part 5 – Conditions of Employment** (Completion of this section is mandatory) | | |
| **Please check to confirm whether you meet the following Conditions of Employment:** | | |
| 1. **Must be legally entitled to work in Canada *(must be able verify status prior to appointment)*** | | YES  NO |
| 1. **Ability to work flexibility with hours of work (ex: evenings/weekends with the ability to work up to 6 hours or more per week)** | | YES  NO |
| 1. **Must provide a current satisfactory Criminal Record Check with a Vulnerable Sector Search** | | YES  NO |
| 1. **Must provide a current and satisfactory adult Child Abuse Registry Check** | | YES  NO |
| 1. **Must provide a current and satisfactory adult Abuse Registry Check** | | YES  NO |
|  | |  |
| **Desired:** | |  |
| **Do you have a valid driver’s license** | | YES  NO |
| **Do you have access to a vehicle** | | YES  NO |
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| **Part 6 – Screening** | | |
| 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. Additional criteria will be reviewed at a later stage for candidates selected for further assessment. | | |
| **Screening Criterion** | **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 providing supervision of children or adults with varying level of disabilities |  | |
| 1. Experience organizing and supporting participants with recreational, educational and social activities for children or adults |  | |
| 1. Experience providing minimal to moderate personal care needs **(desired)** |  | |

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.**