

# Appendix C Application for Employment

## Application for Employment (COMPLETE ALL SECTIONS)

**Community Council:** \_\_\_\_\_ **Position Applied For:** \_\_\_\_\_

### Personal Information

Last Name:	First Name:
Address – Street and Number/City/Province/Postal Code:	Phone Home: <span style="float: right;">Work:</span>

Entitled to work in Canada?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have the use of a vehicle?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Valid Manitoba driver's licence?	Yes <input type="checkbox"/> Class: _____	No <input type="checkbox"/>
Have you ever been employed by council? If yes, when and where?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

### Education

Highest Education Level Attained

**Secondary:**  
 Course Taken:      University Entrance  Business Education  General       Grade Completed: \_\_\_\_\_

**Trade or Technical:**  
 Location: \_\_\_\_\_      Diploma or Certificate: \_\_\_\_\_

Trade Certificate No.: \_\_\_\_\_      Professional Designation: \_\_\_\_\_

Others (specify): \_\_\_\_\_

<b>Post Secondary:</b> University or College <u>Institution</u>	<u>Major</u>	<u>Degree/Diploma</u>	<u>Started</u> Mo/Yr	<u>Left</u> Mo/Yr

<b>Employment History (Present or most recent position first)</b>		
<p>If your duties or responsibilities changed substantially with the same employer, record each change as a separate position. If there is insufficient room on this page, attach extra sheets as required. If resume is attached, complete left side of page.</p>		
Present/Last Employer and Address	Type of Business or Organization	Describe Duties/Responsibilities and Significant Achievements
Position Title		
Period of Employment From: To:	May be Approached for a Reference Yes <input type="checkbox"/> No <input type="checkbox"/> Phone:	
Immediate Supervisor Name and Title		
Reason for Leaving		
Present/Last Employer and Address	Type of Business or Organization	Describe Duties/Responsibilities and Significant Achievements
Position Title		
Period of Employment From: To:		
Immediate Supervisor Name and Title		
	Phone:	
Reason for Leaving		
Present/Last Employer and Address	Type of Business or Organization	Describe Duties/Responsibilities and Significant Achievements
Position Title		
Period of Employment From: To:		
Immediate Supervisor Name and Title		
	Phone:	
Reason for Leaving		

<p><b>Computer Experience</b></p> <p>Do you have word-processing skills?    Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Have you used a computer?    Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>List computer software familiar with.</p>
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**Activities**  
 If you wish, indicate any organizations, activities, hobbies or sports with which you are involved.

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**References**

Name	Address	Phone

**Additional Information:** Please provide any additional information which could assist the selection committee in considering your application for this position.

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**Declaration**

I expressly consent to council verifying any information supplied by me in this application and for that purpose, for the purpose of obtaining any other information pertaining to my suitability for employment. The council may contact any person or persons (not including my present employer), unless otherwise noted in this application.

I certify that the statements made by me are true and to the best of my knowledge.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***This Area For Council Use Only***

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**Notification Statement**  
 This personal information is voluntary and is being collected by council to determine suitability for employment. It is protected by the protection of privacy provisions of The Freedom of Information and Protection of Privacy Act (FIPPA).