

Application For Employment



The Human Rights Code prohibits discrimination in employment because of race, national or ethnic origin, citizenship, religion, age, sex or sexual orientation, marital or family status, Handicap, disability, language (Province of Quebec), or record of offences (including an offence in respect of any provincial statute).

Date: _____

PERSONAL

Name _____

Present Address _____ Prov. _____ Code _____
Tel.No. () _____

Job(s) applied for 1. _____ Rate of pay expected \$ _____ per _____
2. _____ Rate of pay expected \$ _____ per _____

How did you learn of this opening? _____

Do you want to work Full-time or Part-time? Indicate days and hours below, if part-time.

Hours Available	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

Have you worked for us before? _____ If yes, when? _____

If hired, on what day will you be available to start work? _____

Are there any other experiences, skills, or qualifications that you feel would especially fit you for work with us? (If necessary, additional space is provided on page 3 under Personal References).

If hired, do you have reliable means of transportation to get to work? _____

Are you bondable? (Answer only if you have been advised that this information is reasonable and relevant to the position applied for) Yes No

EDUCATION BACKGROUND

Name of Institute	Town/City	Yrs Completed	Did you graduate?	Degree/Dipl.

Describe any honours you have received.

PRIOR WORK HISTORY (List in order, last or present employer first)

Dates		Name & Address of Employer	Rate of pay		Supervisor's Name and Title	Reason for Leaving
From	To		Start	Finish		

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From	To		Start	Finish		

May we contact any of the employers listed above? _____

If not, indicate which one(s) you do not wish us to contact. _____

PERSONAL REFERENCE

Give the names of at least 3 persons who can supply information pertinent to your job performance (excluding former employers or relatives).

Name and Occupation	Address	Phone Number
1. _____	_____	
2. _____	_____	
3. _____	_____	
4. _____	_____	

Occasionally the form of an application blank makes it difficult for an individual to adequately summarize their complete background. To assist us in finding the proper position for you in our company, use the space below to summarize any additional information necessary to describe your full qualifications.

Physical Record

Are you under the care of a physician or currently receiving medical treatment for any injury, physical defect, chronic ailment or any other condition that could affect your ability to perform the job for which you are applying?

_____ Yes _____ No If you answered yes, please explain fully: _____

Thank-you for completing this application form and for your interest in employment with **Central Home Improvement Warehouse**. We would like to assure you that your opportunity for employment with this company will be based only on your merit and on no other consideration.

PLEASE READ CAREFULLY APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant _____