



# EMPLOYMENT APPLICATION

<b>Instructions:</b> Please complete all sections as thoroughly as possible, even if you are attaching a resume. It is necessary to provide complete information as this will be used to determine eligibility.	<b>OFFICE USE ONLY</b>  DATE RECEIVED YYYY / MM / DD
<b>Freedom of Information and Protection of Privacy Act</b> All information to us will be considered as supplied in confidence.	

**POSITION INFORMATION**

COMPETITION NO.	POSITION TITLE	LOCATION	COMPETITION CLOSING DATE YYYY / MM / DD
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FOR GENERAL APPLICATION Indicate ( ✓ ) the type of employment you are requesting	PERMANENT  TEMPORARY	Full Time    Part Time	TYPE(S) OF POSITION – please describe
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**PERSONAL INFORMATION**

LAST NAME	FIRST NAME	INITIALS	Is your age at least 15 years and less than 65 years? YES          NO	RESIDENCE TELEPHONE NO.  BUSINESS TELEPHONE NO. – or message  EMAIL
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MAILING ADDRESS	CITY	PROVINCE	POSTAL CODE
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LEGAL STATUS TO WORK IN CANADA – documentation may be required		Do you have a disability that may require accommodation in the work place? YES          NO	If YES, what accommodation would you need?
CANADIAN CITIZEN	LANDED IMMIGRANT/ PERMANENT RESIDENT		
WORK PERMIT	OTHER – please specify:		

**CURRENT EMPLOYMENT STATUS**

Are you currently employed in the seniors' housing or healthcare fields? NO          YES – If YES, include ( ✓ ) status and provide employee I.D.	EMPLOYEE I.D.
Are you willing to work elsewhere in the province? NO          YES – list locations preferred >	Oak Tree Lodge - Richmond      West Shore Lodge - Victoria

**EDUCATION & TRAINING**

Please describe secondary, post secondary, courses and training which have given you work related knowledge and skills. Start with highest level achieved and specify the degrees, certificates or diplomas completed. Official documentation may be required. Attach a separate page if necessary.

NAME OF INSTITUTION OR ORGANIZATION	LOCATION	YEAR TAKEN	AREA OF STUDY / COURSE	GRADE / CERTIFICATION / DIPLOMA / DEGREE	COMPLETED	YES	NO

**ASSOCIATION / PROFESSIONAL AFFILIATIONS**

List any active memberships or registrations in a professional or career related organization or society.

**WORK HISTORY**

Beginning with your most RECENT experience, describe your work history. You may wish to include relevant volunteer positions. In the area for "Duties and Skills" describe the *major* duties and skills acquired/used as they relate to the position you are applying for. If any references have known you by a previous name, please specify. Attach additional pages if required.

EMPLOYER AND LOCATION		FROM YYYY / MM / DD	TO YYYY / MM / DD
SUPERVISOR – REFERENCE	SUPERVISOR'S TELEPHONE NO.	REASON FOR LEAVING	
POSITION HELD BY APPLICANT	JOB CLASSIFICATION – If applicable	SALARY	NO. OF PEOPLE SUPERVISED – If applicable
DUTIES AND SKILLS			

EMPLOYER AND LOCATION		FROM YYYY / MM / DD	TO YYYY / MM / DD
SUPERVISOR – REFERENCE	SUPERVISOR'S TELEPHONE NO.	REASON FOR LEAVING	
POSITION HELD BY APPLICANT	JOB CLASSIFICATION – If applicable	SALARY	NO. OF PEOPLE SUPERVISED – If applicable
DUTIES AND SKILLS			

EMPLOYER AND LOCATION		FROM YYYY / MM / DD	TO YYYY / MM / DD
SUPERVISOR – REFERENCE	SUPERVISOR'S TELEPHONE NO.	REASON FOR LEAVING	
POSITION HELD BY APPLICANT	JOB CLASSIFICATION – If applicable	SALARY	NO. OF PEOPLE SUPERVISED – If applicable
DUTIES AND SKILLS			

EMPLOYER AND LOCATION		FROM YYYY / MM / DD	TO YYYY / MM / DD
SUPERVISOR – REFERENCE	SUPERVISOR'S TELEPHONE NO.	REASON FOR LEAVING	
POSITION HELD BY APPLICANT	JOB CLASSIFICATION – If applicable	SALARY	NO. OF PEOPLE SUPERVISED – If applicable
DUTIES AND SKILLS			

**SKILLS / EXPERIENCE**

Check (✓) areas of skills/experience that you have which relate to the advertised position or, if this is a general application, to the position(s) that interests you, and attach any appropriate documentation.

	TYPING SPEED	NO. OF YEARS/MONTHS EXPERIENCE/ TRAINING	LIST RELATED EQUIPMENT, HARDWARE AND/OR SOFTWARE APPLICATIONS
OFFICE/BOOKEEPING			
HOUSEKEEPING			
FOOD SERVICES			
MAINTENANCE/PHYSICAL PLANT			
OTHER			

**SKILLS / ACHIEVEMENTS**

Briefly summarize your knowledge and major skills / achievements which relate to the advertised position or, if this is a general application, to the position(s) that interests you. You may use this space to enter other information you would like us to consider in reviewing your application. Attach additional pages if required.

**DRIVER'S LICENSE INFORMATION**

Provide the following information if applying for a position where driving is a requirement.

List class(es) of valid driver's license.	List any restrictions / endorsement definitions on license.	If required, do you have access to a vehicle for use for business purposes?	
		YES	NO

**REFERENCES**

Reference checks will be conducted to assess your past work performance and may include checks of attendance records. In addition to the references identified in the "Work History" section, you may wish to provide further references. If any references have known you by a previous name, please specify.

NAME	TELEPHONE NO.	RELATIONSHIP	NO. OF YEARS KNOWN

**APPLICANT SIGNATURE**

Please read carefully before authorizing. This application is not valid unless your name, as authorization, is signed or written in the "Signature" space provided below. (Note: If this application is submitted electronically, it is not valid unless your name is keyed in the "Signature" space provided below).

Your authorization on this application form is your consent that, as a condition of being considered for employment, references about past work performance will be obtained from your current and previous employers. You are also acknowledging that short-listed applicants will be subject to a criminal background check.

I certify that the information provided in this application or attachments / resume is true and complete. I understand that if any information in this application or attachments / resume is found to be untrue or incomplete, my application may be rejected or I may be dismissed in the event that I am the successful applicant.

X	DATE SIGNED YYYY / MM / DD
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SIGNATURE (If applying electronically please type your name as authorization)