



EMPLOYMENT APPLICATION FORM

PLEASE COMPLETE REQUESTED INFORMATION (PLEASE PRINT)

APPLICANT INFORMATION			
Full Name:			
Address:			
City:	Province:	Postal Code:	
Primary Number: ()		Cell Phone Number: ()	
Are you legally eligible to work in Canada? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Are you of legal age to work in your province? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Have you ever interviewed with 3304051 Nova Scotia Limited? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Did you work for Hefler before? <input type="checkbox"/> YES <input type="checkbox"/> NO			
<i>If yes:</i>			
Position _____		Year(s) _____	
Position _____		Year(s) _____	
Have you been convicted of a criminal offence which is connected to the position you are applying for and for which a pardon has not been granted? <input type="checkbox"/> YES <input type="checkbox"/> NO			
<i>If yes, please provide details regarding the nature of the infraction(s):</i>			
<i>(Note: a criminal conviction will not necessarily be a bar to employment)</i>			

TELL US WHAT YOU ARE LOOKING FOR:

Position Desired:							
Available Start Date:							
<input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME							
Please provide your weekday hours availability below:							
	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
<i>Ex. Morning</i>	Yes	Yes	Yes	Yes	Yes	Yes	No
Morning							
Afternoon							
Evening							
Night							



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TELL US ABOUT YOUR EDUCATION:

TYPE OF SCHOOL	HIGHEST GRADE/ YEAR COMPLETED	NAME OF SCHOOL AND / OR COURSE OF STUDY OR MAJOR	LAST YEAR ATTENDED
Middle School / High School			
Vocational/Trade School			
Other			
<p>List any other certifications or licenses you currently have that are NOT expired (i.e. Forklift Operator, Fall Protection Training, Confined Space Training, First Aid Training, etc.)</p> <ul style="list-style-type: none"> • • • • 			

TELL US ABOUT YOUR PAST JOBS:

PLEASE SEE ATTACHED RESUME

OR

Start with your most recent employer. You may include as part of your employment history any work performed on a volunteer basis

POSITION ONE	
Where did you work?	
Start Date:	End Date:
What was your position?	
What were your duties/responsibilities in this position?	
Why did you leave?	
May we call your supervisor? <input type="checkbox"/> YES <input type="checkbox"/> NO	Supervisor Name:
	Supervisor Contact Information:

POSITION TWO	
Where did you work? (include name of company and phone number)	
Start Date:	End Date:
What was your position?	



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What were your duties/responsibilities in this position?	
Why did you leave?	
May we call your supervisor? <input type="checkbox"/> YES <input type="checkbox"/> NO	Supervisor Name:
	Supervisor Contact Information:

TELL US MORE ABOUT YOURSELF:

Why do you want to work for 3304051 Nova Scotia Limited?
How would you describe a strong work safety culture?
What are the things you liked about your previous jobs?
What are some of the things you did not like about your previous jobs?

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 #	Relationship	# of Years Known

APPLICANT SIGNATURE:

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 terminated for just cause in the event that I am the successful applicant.

Signature	
Date Signed	