

EMPLOYMENT APPLICATION

Applicant Information						
Full Name:						
	Last	First	Mida	lle Initial		
Address:						
Audi C33	Mailing Address			Apartment/Unit #		
	City		Province	Postal Code		
Phone:		Email Address:				
		Desired Salary	. ċ			
Date Available	e:	Desired Salary	. >			
Department Applying To: ☐ Administration ☐ Agriculture ☐ Natural Gas Utility ☐ Public Works ☐ Water & Sewer Type of Employment: ☐ Permanent ☐ Temporary ☐ Seasonal ☐ Summer Student Are you a citizen of Canada? ☐ Yes ☐ No ☐ If no, are you authorized to work in Canada? ☐ Yes ☐ No Have you ever worked for the County? ☐ Yes ☐ No ☐ If yes, when and what position?:						
*** Prior to hiring, we require a criminal records check and drivers abstract ***						
Education						
High School:		Tov	ın/City:			
				Diploma:		
				Dipiona.		
		_		Degree:		
				Degree.		
				Degree:		
110111.	10.			Degree.		
		Reference	es			
Please List Two	o Professional Reference	es:				
Full Name:		Ro	elationship:			
Company:				_ Phone: ()		
Address:						
				Phone: ()		
Address:						



Previous Employment						
Company:		Phone: ()				
Address:		Supervisor:				
Job Title:	Starting Salary: \$	S Ending Salary: \$				
Responsibilities:						
From:	To: Reason for Lea	ving:				
May we contact your previous supervisor for a reference? Yes No						
Company:		Phone: ()				
Address:		Supervisor:				
Job Title:	Starting Salary: \$	S Ending Salary: \$				
Responsibilities:						
From:	To: Reason for Lea	ving:				
May we contact your previous supervisor for a reference? Yes No						
Company:		Phone: ()				
Address:		Supervisor:				
Job Title:	Starting Salary: \$	S Ending Salary: \$				
Responsibilities:						
From:	To: Reason for Lea	ving:				
May we contact your previous supervisor for a reference? ☐Yes ☐No						
	Disclaimer and	Signature				
I certify that my answers are true and complete to the best of my knowledge.						
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.						
		om of Information and Protection of Privacy Act (Section 32) or can answer any questions concerning the collection of the				
Signature		Date				