



95 Cumberland Street North, Thunder Bay, ON P7A 4M1
 Phone (807) 344-4994 Fax (807) 346-5811

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS TO APPLICANTS

ALL QUESTIONS MUST BE COMPLETED IN PRINT OR TYPE. IF MAILED, PLEASE SEND TO HUMAN RESOURCES, AT THE ABOVE ADDRESS. PLEASE NOTE THAT THIS APPLICATION MUST BE RENEWED WITHIN SIX (6) MONTHS TO REMAIN ACTIVE AND HUMAN RESOURCES SHOULD BE NOTIFIED OF ANY CHANGES AFFECTING THE INFORMATION CONTAINED HEREIN.

POSITION APPLIED FOR					
1st Choice: _____			2nd Choice: _____		
Nature of Employment Wanted:		Regular Full Time: _____		Temporary Full Time: _____	
Regular Part Time: _____		Temporary Part Time: _____		Casual: _____	
Shifts Available For:		All _____	Days _____	Evenings _____	Nights _____
Weekends _____					

PERSONAL INFORMATION			
Name: _____		_____	
Last		Given Name(s)	
Address: _____			
Street/Rural Route #		City	Postal Code
Telephone Number: _____			
Residence		Business	Cellular
Previous Name known to references if different from present name: _____			Are you legally entitled to work in Canada? _____

EDUCATIONAL BACKGROUND			
SECONDARY SCHOOL	COMPLETED: YES _____ NO _____	DIPLOMA RECEIVED: YES _____ NO _____, IF YES STATE TYPE: _____	
POST SECONDARY	COMPLETED: YES _____ NO _____	DIPLOMA/DEGREE/CERTIFICATE RECEIVED: YES _____ NO _____	
LIST PROGRAM/SPECIALIZATION	SPECIFY DIPLOMA/DEGREE /CERTIFICATE	INSTITUTION	DID YOU GRAUDATE? YES/NO

Certifications/Professional Registrations (Indicate Type and Status)

Individual Courses/Credits (list)

Volunteer Work:

OPTIONS northwest EMPLOYMENT HISTORY	
Have you worked for us before? _____	If yes, indicate employment date(s) and position(s) held: _____

WORK EXPERIENCE (begin with most recent. Do not include OPTIONS northwest work experience noted on reverse side)

Name of Employer: _____

Address: _____ Telephone Number: _____

Job Title(s): _____ Dates Employed: From: _____ To: _____

Briefly Describe Duties: _____

Reason for Leaving: _____

Name of Supervisor: _____ Title: _____

WORK EXPERIENCE

Name of Employer: _____

Address: _____ Telephone Number: _____

Job Title(s): _____ Dates Employed: From: _____ To: _____

Briefly Describe Duties: _____

Reason for Leaving: _____

Name of Supervisor: _____ Title: _____

WORK EXPERIENCE

Name of Employer: _____

Address: _____ Telephone Number: _____

Job Title(s): _____ Dates Employed: From: _____ To: _____

Briefly Describe Duties: _____

Reason for Leaving: _____

Name of Supervisor: _____ Title: _____

RESUME ATTACHED: YES NO

REFERENCES: LIST THREE WORK REFERENCES PLEASE

NAME	OCCUPATION	ORGANIZATION ADDRESS	TELEPHONE

REFERENCES

I authorize the references listed above, and/or listed on a separate page attached to this application; to release to OPTIONS northwest any information requested with regards to my application to the position being applied for.

Signature of Applicant: _____ Date: _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the information on this application is true and complete. I understand that a false statement or omission may be sufficient reason for my rejection or cause my dismissal. If I am offered a position I understand that I will be required to obtain & present a criminal reference check the results of which must meet OPTIONS northwest's criteria to perform essential job duties. I understand that any costs incurred in obtain a criminal reference check will be at my own expense.

Signature of Applicant: _____ Date: _____

The questions in this boxed area are NOT a part of this Application For Employment. Job Applicants are NOT to complete this section.

Former Names: _____

Date of Birth: _____ Sex: M _____ F _____ Health Insurance No: _____

M/D/Y

Social Insurance Number: _____

Languages Spoken: _____ Written: _____

Person to be notified in case of accident or emergency

Name: _____

Address: _____

Telephone: Home: _____ Business: _____