

About Applicant

Demo Employment Application Form							
Last Name		First Name		Middle Name			
Home Address		Apt/Suite #		City/Town		Province/State	
Postal/Zip Code		Home Phone		Cell Phone		S.I.N.	

JOB SELECTION

SELECT THE POSITION YOU ARE APPLYING FOR (YOU MAY CHOOSE MORE THAN ONE)							
LIGHT DUTY TOW TRUCK OPERATOR		FLATBED OPERATOR		HEAVY DUTY TOW TRUCK OPERATOR		LIGHT SERVICE VEHICLE OPERATOR	
YARD WORKER		CUSTOMER SERVICE REP./CALL-TAKER		DISPATCHER		CLERICAL / ADMINISTRATION	
MANAGERIAL POSITION		SALES STAFF		WHAT RATE OF PAY DO YOU EXPECT?			
IF HIRED, WHEN CAN YOU BEGIN TO WORK?				DESCRIBE WHAT TYPE OF WORK YOU ARE SEEKING?			
FULL-TIME		PART-TIME		TEMPORARY		SEASONAL	
IF THERE ANY DAYS OR NIGHTS YOU CANNOT WORK PLEASE SPECIFY				CAN YOU READ, WRITE AND SPEAK ENGLISH FLUENTLY?			
OTHER LANGUAGES YOU CAN READ, WRITE AND SPEAK FLUENTLY:							

EDUCATION

HIGH SCHOOL ATTENDED?		FROM		TO	
HIGHEST GRADE COMPLETED?				GRADUATED	
COLLEGE / TECHNICAL SCHOOL				GRADUATED	
COLLEGE/TECHNICAL SCHOOL				GRADUATED	
COLLEGE/TECHNICAL SCHOOL				GRADUATED	

AT YOUR COMPANY

APPLIED		EMPLOYEES/SUB-CONTRACTED		NEITHER	
POSITION HELD OR APPLIED FOR IN PAST			LOCATION		
DATE APPLIED		DATE HIRED		DATE LEFT	
DO YOU KNOW ANYONE EMPLOYED/ SUB-CONTRACTED?		WHO? FIRST AND LAST NAMES			
POSITION		LOCATION		RELATIONSHIP	
DO YOU HAVE FRIENDS OR RELATIVES WORKING FOR OUR COMPANY?		WHO? FIRST AND LAST NAMES		RELATIONSHIP	
PROVIDE THE NAME OF THE INDIVIDUAL OR ORGANIZATION THAT REFERRED YOU?					

EMPLOYMENT HISTORY

PRESENT AND PAST EMPLOYMENT (most recent first)	
ARE YOU CURRENTLY EMPLOYED?	
IF YES CAN WE CONTACT YOUR PRESENT EMPLOYER?	

EMPLOYMENT 1

EMPLOYER		MONTH/YEAR HIRED		MONTH/YEAR LEFT	
ADDRESS		CITY		PROVINCE	
PHONE		SUPERVISOR NAME AND TITLE		TYPE OF BUSINESS	
YOUR POSITION		RATE OF PAY		REASON FOR LEAVING	

EMPLOYER 2

EMPLOYER		MONTH/YEAR HIRED		MONTH/YEAR LEFT	
ADDRESS			CITY	PROVINCE	
PHONE		SUPERVISOR NAME AND TITLE		TYPE OF BUSINESS	
YOUR POSITION		RATE OF PAY		REASON FOR LEAVING	

EMPLOYER 3

EMPLOYER		MONTH/YEAR HIRED		MONTH/YEAR LEFT	
ADDRESS			CITY	PROVINCE	
PHONE		SUPERVISOR NAME AND TITLE		TYPE OF BUSINESS	
YOUR POSITION		RATE OF PAY			
REASON FOR LEAVING					

EMPLOYER 4

EMPLOYER		MONTH/YEAR HIRED		MONTH/YEAR LEFT	
ADDRESS			CITY	PROVINCE	
PHONE		SUPERVISOR NAME AND TITLE		TYPE OF BUSINESS	
YOUR POSITION		RATE OF PAY		REASON FOR LEAVING	

LEGAL MATTERS

HAVE YOU EVER BEEN CONVICTED OF A CRIME INVOLVING ALCOHOL OR OTHER CONTROLLED SUBSTANCES, ARSON, VANDALISM, FIREARMS, OR OTHER WEAPONS, THEFT, DISHONEST, THREATS OR VIOLENCE UNDER YOUR CURRENT NAME OR ANY OTHER NAME					
YOUR ANSWER		IF YES, DESCRIBE HERE			
NOTE: Depending on the position you are applying for a police search will be obtained.					
OFFENSES			DATE CONVICTED		
PENALTY				OCURRED IN THE WORK PLACE	
UNDER WHAT NAME IF A DIFFERENT NAME?					
OFFENSE			DATE CONVICTED		
PENALTY				OCURRED IN THE WORK PLACE	
UNDER WHAT NAME IF DIFFERENT NAME?					

YOUR SKILLS

CALL CENTRE / ADMINISTRATION / CLERICAL APPLICANTS	
DISPATCHER - YEARS TRAINING	
DISPATCHER - YEARS EXPERIENCE	
SERVICE REP./CALL-TAKER - YEARS TRAINING	
SERVICE REP./CALL-TAKER - YEARS EXP	
CASHIER / RELEASE COUNTER - YEARS TRAINING	
CASHIER / RELEASE COUNTER - YEARS EXP	
CLERICAL - YEARS TRAINING	
CLERICAL - YEARS EXP	
ACCOUNTS PAYABLE - YEARS TRAINING	
ACCOUNTS PAYABLE - YEARS EXP	
ACCOUNTS RECEIVABLE - YEARS TRAINING	

ACCOUNTS RECEIVABLE - YEARS EXP	
TYPING / WPM - YEARS TRAINING	
TYPING / WPM - YEARS EXP	
DATA ENTRY - YEARS TRAINING	
DATA ENTRY - YEARS EXP	
APPLICANTS MUST READ AND AGREE TO THE BELOW	
1. Completing this application will in no way assure that you will be employed.	
2. This application was completed by me, all information I have provided in it are true and complete to the best of my knowledge. Giving false information is a federal offence and is subject to disqualification or discharge. I will provide freely such information or documents that may be required to complete my employment file.	
3. I hereby authorize your company or it's agents to investigate my previous record of employment to ascertain any and all information required to assist them in decision making to employ or sub-contract me.	
I AGREE	
Sign above online with stylus or finger!	