

# Huron – Superior Catholic District School Board



90 Ontario Avenue  
 Sault Ste. Marie, Ontario  
 P6B 6G7  
 Phone: (705) 945-5610  
 Fax: (705) 945-5503

## APPLICATION FOR EMPLOYMENT

*Position being applied for:*

*Date available to begin work:*

### PERSONAL DATA

*Last name*                      *Given name(s)*

*Address*

*Apt. No.*

*Home Telephone No.*

*City*

*Province*

*Postal Code*

*Business Telephone No.*

*Do you want to work:*                       *FULL-TIME*                       *PART-TIME*  
*Have you worked for us before?*     *YES*                       *NO*                      *If yes, when?*

### EDUCATION

#### SECONDARY SCHOOL

#### BUSINESS, TRADE OR TECHNICAL SCHOOL

*Highest grade or level completed*

*Name of course*

*Length of course*

*Type of certificate or diploma received*

*Licence, certificate or diploma awarded?*

*Yes*                       *No*

#### COMMUNITY COLLEGE

#### UNIVERSITY

*Name of program*

*Length of program*

*Length of course*

*Degree awarded*

*Degree(s)*

*Yes*                       *No*

*Diploma received?*

*Yes*                       *No*

*Major Subject*

*Other courses, workshops, seminars:*

*Licences, Certificates, Degrees:*

#### Work Related Skills:

DESCRIBE ANY OF YOUR WORK RELATED SKILLS, EXPERIENCE OR TRAINING THAT RELATE TO THE POSITION BEING APPLIED FOR.

<b>EMPLOYMENT RECORD</b>
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<i>Name and Address of Present/last employer</i>	<i>Present/Last Job Title</i>	
	<i>Period of employment: From                      To</i>	<i>Final Salary</i>
	<i>Name of Supervisor</i>	<i>Telephone</i>
<i>Type of Business</i>	<i>Reason for leaving</i>	
<i>Duties/Responsibilities</i>		

<i>Name and Address of previous employer</i>	<i>Job Title</i>	
	<i>Period of employment: From                      To</i>	<i>Final Salary</i>
	<i>Name of Supervisor</i>	<i>Telephone</i>
<i>Type of Business</i>	<i>Reason for leaving</i>	
<i>Duties/Responsibilities</i>		

<i>Name and Address of previous employer</i>	<i>Job Title</i>	
	<i>Period of employment: From                      To</i>	<i>Final Salary</i>
	<i>Name of Supervisor</i>	<i>Telephone</i>
<i>Type of Business</i>	<i>Reason for leaving</i>	
<i>Duties/Responsibilities</i>		

**Personal Information on this form is collected under the authority of the Municipal Freedom of Information & Protection of Privacy Act, 1989, and will be used to determine eligibility for employment.**

*I hereby certify the information supplied by me on this form is true, accurate and complete and is not intended, in any respect, to be misleading to the Company. I understand that a false statement may disqualify me from employment, or cause my dismissal.*

*Furthermore, I hereby authorize the Company or its agents, to discuss this application for employment form and my abilities, qualifications, skills and experience with any reference or previous employer and to conduct or cause to be conducted a personal investigation of me in connection with my possible employment with the Company. I authorize all corporations, companies, educational institutions, persons, and former employers to release information they may have about me to the Huron - Superior Catholic District School Board or its agents.*

*I hereby release all such persons from liability or damages or responsibility incurred as a result of any inquiry made and the furnishings of this information.*

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT'S SIGNATURE