



**1. Personal Information**

Full Name:

Date of Birth:

Address:

City:

Province:

Postal Code:

Phone Number:

Email Address:

SIN (Optional at Application Stage):

**2. Employment Desired**

Position Applying For:

Available Start Date:

Preferred Shift:  Day  Evening  Night  Weekends

Are you legally eligible to work in Canada?  Yes  No

Do you have reliable transportation to work?  Yes  No

**3. Employment History (Most Recent Employer)**

Most Recent Employer:

Position Held:

Start Date:

End Date:

Reason for Leaving:

Supervisor Name and Phone:

May we contact this employer?  Yes  No

*Continue on page 2 for previous employment, education, references and declaration.*



### 3. Employment History (Previous Employers)

Previous Employer 1:

Position Held:

Start Date:  End Date:

Reason for Leaving:

Supervisor Name and Phone:

Previous Employer 2:

Position Held:

Start Date:  End Date:

Reason for Leaving:

Supervisor Name and Phone:

Additional Employer (optional):

Position Held:

Start Date:  End Date:

### 4. Education & Skills

Highest Level of Education Completed:

School Name:

Special Training/Certifications (e.g., Forklift):

Languages Spoken:

### 5. References

Reference 1 - Name:

Relationship:

Phone Number:

Reference 2 - Name:

Relationship:

Phone Number:

Continue on page 3 for declaration, signature and consent.



## 6. Declaration

I certify that the information provided is true and complete to the best of my knowledge. I authorize FKAL Employment Solutions

Signature:

Date:

I consent to FKAL Employment Solutions Inc. verifying my references and employment history:

Yes

No

If submitting electronically, type your name below to serve as an electronic signature:

### Office Use Only

Date Received:

Position Hired For:

Start Date (if hired):

Notes: