



Date Received: _____

Applied at (Please circle one): 70 Princess St. / 17-2136 McPhillips St. / 3431 Portage Ave.
 1540 Pembina Hwy. / 317 St. Anne's Rd. / 16 Main St., Ashern, MB / Online / Fax

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Last Name	First Name	Home Phone
Cell/Other		
Address:	Street	Apt
	City	Province
	Postal Code	
Are you entitled to work in Canada?	Yes_____	No_____
Please indicate languages spoken and written: _____		
Do you have a valid Drivers License? (only if applicable for position)	Yes_____	No_____

EMPLOYMENT DESIRED

What position are you applying for? (please circle position):

Salesclerk
 Production
 Driver/Driver Assistant
 Administration
 Management
 Volunteer
 Other

Are you available for (please circle one): Full Time Part Time

What is your Availability?

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

Are you willing to travel ? Yes_____ No _____ Are you willing to relocate? Yes _____ No_____

Have you ever been employed by Canadian Goodwill Industries before? Yes_____ No_____

If Yes _____ _____ _____

Date From To What was your position when you left?

What source referred you to this Company? _____

EDUCATION

Type	Course Taken	Number yrs Completed	Diploma/Degree
High School:			
College:			
University:			
Additional Courses, Seminars, Work Shops: _____			

Describe any of your work related skills, experience or training that is related to the position being replied for:

EMPLOYMENT RECORD (MOST RECENT EMPLOYER FIRST)

COMPANY NAME & ADDRESS

PRESENT/ LAST JOB TITLE

LENGTH OF EMPLOYMENT

TO: _____ FROM: _____

DUTIES / RESPONSIBILITIES

NAME & NUMBER OF IMMEDIATE SUPERVISOR

REASON FOR LEAVING

MAY WE CONTACT YES ___ NO ___

SALARY/WAGE _____

COMPANY NAME & ADDRESS

PRESENT/ LAST JOB TITLE

LENGTH OF EMPLOYMENT

TO: _____ FROM: _____

DUTIES / RESPONSIBILITIES

NAME & NUMBER OF IMMEDIATE SUPERVISOR

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MAY WE CONTACT YES ___ NO ___

SALARY/WAGE _____

COMPANY NAME & ADDRESS

PRESENT/ LAST JOB TITLE

LENGTH OF EMPLOYMENT

TO: _____ FROM: _____

DUTIES / RESPONSIBILITIES

NAME & NUMBER OF IMMEDIATE SUPERVISOR

REASON FOR LEAVING

MAY WE CONTACT YES ___ NO ___

SALARY/WAGE _____

REFERENCES**LIST TWO REFERENCES TO WHOM WE MAY REFER (NOT RELATIVES):**

NAME OCCUPATION TELEPHONE

NAME OCCUPATION TELEPHONE

OUTSIDE HOBBIES AND INTERESTS, SERVICE CLUBS OR PROFESSIONAL ASSOCIATIONS**AGREEMENT**

I HEREBY CERTIFY TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE ANSWERS GIVEN BY ME TO THE FORGOING QUESTIONS AND ALL STATEMENTS MADE BY ME IN THIS APPLICATION ARE CORRECT. I UNDERSTAND THAT ANY FALSE INFORMATION OR MATERIAL OMISSION CONTAINED IN THIS APPLICATION IS CAUSE FOR IMMEDIATE DISMISSAL. I UNDERSTAND AND ACCEPT THAT SHOULD I BE GRANTED THE POSITION I AM APPLYING FOR THE FIRST 90 DAYS OF EMPLOYMENT WILL BE CONSIDERED A PROBATIONARY PERIOD, DURING WHICH TIME CANADIAN GOODWILL INDUSTRIES CORP. CAN TERMINATE MY EMPLOYMENT AT ITS DISCRETION WITHOUT NOTIFICATION. I HEREBY AUTHORIZE CANADIAN GOODWILL INDUSTRIES CORP. OR ANY OF ITS REPRESENTATIVES TO VERIFY THE INFORMATION GIVEN ON THIS APPLICATION.

SIGNATURE _____ DATE _____

****All new employees may be subject to a criminal record check****