CANADIAN GOODWILL
Sharing Secondhand Stories

APPLICATION FOR EMPLOYMENT

Date of Application: _____

Applied at (please check one): ☐ 70 Princess St. ☐ 1540 Pembina Hwy ☐ 3431 Portage Ave.
☐ 16 Main St., Ashern, MB ☐ 317 St. Anne's Rd. ☐ Email ☐ Online (website) ☐ Fax

PERSONAL INFORMATION

First Name _____ Last Name _____ Home Phone _____ Cell/Other _____

Address (Street) _____ Apt _____ City _____ Province _____ Postal Code _____

Email _____

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 check all that apply):

☐ Retail Clerk ☐ Production/Warehouse ☐ Driver ☐ Driver Assistant ☐ Administration

☐ Management ☐ Other (please specify): _____

Are you available for? ☐ Full Time ☐ Part Time

What is your availability?:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

Have you ever been employed by Canadian Goodwill Ind. before? Yes ☐ No ☐

If Yes: Date From _____ To _____ What was your position when you left? _____

What source referred you to this company? _____

EDUCATION

High School:

NAME OF SCHOOL	# OF YEARS COMPLETED	FROM	TO	GRADE 12 DIPLOMA
				Yes ☐ No ☐

Post Secondary:

NAME OF INSTITUTION	# OF YEARS COMPLETED	FROM	TO	MAJOR / MINOR

Degree(s) / Certification(s):

Additional Courses, Seminars, Work Shops (if applicable):

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

EMPLOYMENT RECORD (MOST RECENT EMPLOYER FIRST)

COMPANY NAME	ADDRESS	PHONE NUMBER

JOB TITLE ______________________ LENGTH OF EMPLOYMENT: From ______ To ______

REASON FOR LEAVING ______________________

DUTIES / RESPONSIBILITIES ______________________

IMMEDIATE SUPERVISOR: First Name ______ Last Name ______

Phone #: ______________ Email #: ______________

MAY WE CONTACT? YES ☐ NO ☐ SALARY/WAGE : ______________

COMPANY NAME	ADDRESS	PHONE NUMBER

JOB TITLE ______________________ LENGTH OF EMPLOYMENT: From ______ To ______

REASON FOR LEAVING ______________________

DUTIES / RESPONSIBILITIES ______________________

IMMEDIATE SUPERVISOR: First Name ______ Last Name ______

Phone #: ______________ Email #: ______________

MAY WE CONTACT? YES ☐ NO ☐ SALARY/WAGE : ______________

COMPANY NAME	ADDRESS	PHONE NUMBER

JOB TITLE ______________________ LENGTH OF EMPLOYMENT: From ______ To ______

REASON FOR LEAVING ______________________

DUTIES / RESPONSIBILITIES ______________________

IMMEDIATE SUPERVISOR: First Name ______ Last Name ______

Phone #: ______________ Email #: ______________

MAY WE CONTACT? YES ☐ NO ☐ SALARY/WAGE : ______________

REFERENCES

LIST TWO REFERENCES TO WHOM WE MAY REFER (NON-RELATIVES):

1) NAME	OCCUPATION	TELEPHONE
2) NAME	OCCUPATION	TELEPHONE

OUTSIDE HOBBIES AND INTERESTS, SERVICE CLUBS OR PROFESSIONAL ASSOCIATIONS

APPLICANT DECLARATION AND AGREEMENT

I certify that the information provided in this application is true, complete, and accurate to the best of my knowledge. I understand that any false, misleading, or omitted information may result in the rejection of my application or termination of employment. I authorize Canadian Goodwill Ind. Corp. (CGIC) to verify the information provided in this application and to obtain employment-related references as required. I understand that submission of this application does not guarantee employment and that any offer of employment may be subject to satisfactory reference checks, background checks, and other job-related requirements, where permitted by law. If hired, I acknowledge that the first ninety (90) days of employment will be a probationary period, during which my employment may be terminated in accordance with applicable employment legislation.

By signing below, I confirm that I have read, understood, and agree to the terms outlined above.

SIGNATURE ______________________ DATE ______________