



Application for Employment

PERSONAL AND CONFIDENTIAL

By completing and submitting this application for employment form, you hereby consent to Co-op's use of the information provided by you on this form to determine your qualification and suitability for employment. The information will also be used to communicate with you on any matters relating to your application for employment. Please carefully read and complete all areas of this form.

Name: Last	First	Second	Resume Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No
Address: No. And Street	City or Town	Province	Postal Code
Telephone: Email:			
Are you legally entitled to work in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been convicted of a criminal offence for which a pardon has not been granted? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been employed by Co-op? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Preferred Work Location:		If necessary, would you accept a transfer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Position you are applying for:			
Salary Expectations:		How did you find out about the position? <input type="checkbox"/> Website <input type="checkbox"/> Referral <input type="checkbox"/> Online <input type="checkbox"/> Other	
Availability: <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Nights <input type="checkbox"/> Weekends		Preference for (if applicable): <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-time <input type="checkbox"/> Casual	

ONLY COMPLETE EDUCATION AND EMPLOYMENT HISTORY IF YOU ARE NOT ATTACHING A RESUME AND COVER LETTER

Education	Year Completed	School Name And Address	Major Field	Attainment
College or University				Specify Degree Or Diploma Obtained:
Business, Trade or Other School				Specify Certification Obtained:
High School			Highest Grade Completed:	Achieved Required Credits? <input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT HISTORY (begin with most recent)

Company Name:	
Type Of Business:	
Position Title:	Key Responsibilities
<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary	
Employed: From: _____, _____ Month, Year	To: _____, _____ Month, Year
Reason For Leaving	

