



# DISTRICT OF NORTH SAANICH

1620 Mills Road, North Saanich, B.C., V8L 5S9  
Phone: 250-656-0781 Fax: 250-656-3155  
Email: admin@northsaanich.ca

## Application For Employment

Position/Type of Work Applied for:

FullTime  Part Time  Temporary

### PERSONAL

Name: \_\_\_\_\_  
Last First Middle Initial

Present Address: \_\_\_\_\_  
Street No. Street Name City Province Postal Code

Telephone No.: \_\_\_\_\_ Message Telephone No.: \_\_\_\_\_

### EDUCATION

Name of Institution	Major Courses of Study	Degree/Diploma Obtained	From		To	
			Month	Year	Month	Year

### OTHER RELATED COURSES/TRAINING/SKILLS

Word Processing \_\_\_\_\_ wpm

Experience with the following software programs:

\_\_\_\_\_

Apprenticeship Training \_\_\_\_\_

Special Qualifications/Abilities \_\_\_\_\_

Do you have a current B.C. Driver's License? \_\_\_\_\_ Class \_\_\_\_\_

Machinery Operated (e.g. backhoe, tractor) \_\_\_\_\_

Other Pertinent Information \_\_\_\_\_

If hired, do you have a reliable means of transportation to get to work? \_\_\_\_\_

**EMPLOYMENT HISTORY** (List most recent first)

Dates		Employer's Name and Address	Job Title	Supervisor's Name and Title
From	To			
<b>Main Duties</b>				
<b>Reason for Leaving</b>				

Dates		Employer's Name and Address	Job Title	Supervisor's Name and Title
From	To			
<b>Main Duties</b>				
<b>Reason for Leaving</b>				

Dates		Employer's Name and Address	Job Title	Supervisor's Name and Title
From	To			
<b>Main Duties</b>				
<b>Reason for Leaving</b>				

Dates		Employer's Name and Address	Job Title	Supervisor's Name and Title
From	To			
<b>Main Duties</b>				
<b>Reason for Leaving</b>				

Dates		Employer's Name and Address	Job Title	Supervisor's Name and Title
From	To			
<b>Main Duties</b>				
<b>Reason for Leaving</b>				

Dates		Employer's Name and Address	Job Title	Supervisor's Name and Title
From	To			
<b>Main Duties</b>				
<b>Reason for Leaving</b>				

May previous employers be contacted? \_\_\_\_\_

May present employers be contacted? \_\_\_\_\_

### REFERENCES

Give the names, addresses and occupations of three references who can supply information pertinent to your job performance.

Name	Occupation	Address	Phone No.

### APPLICANT'S CERTIFICATION AND AGREEMENT

I understand and agree that if employed, any omission or false statement in this application will be sufficient cause for dismissal.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Applicant

