

# APPLICATION FOR EMPLOYMENT

## PERSONAL DATA

Last Name	First Name	Home Phone No.	Work Phone No.		
Address: No.	Street	Apt.	City	Province	Postal Code
Are you entitled to work in Canada? Yes _____ No _____		Are you under the age of 18 or over the age of 65? Yes _____ No _____			
Please indicate languages spoken and written: _____					

## EMPLOYMENT DESIRED

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

Salesclerk	Merchandise Processing	Management	Admin/General	Other
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Are you available for: (please circle desired status)

Full Time	Part Time
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What shifts do you prefer? (please circle)

Weekdays	Saturday	Sunday
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What is your availability? (please circle choices)

Days	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Evenings	Mon	Tues	Wed	Thurs	Fri	Sat	Sun

Are you willing to travel? Yes \_\_\_\_\_ No \_\_\_\_\_      Are you willing to relocate? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you worked for Value Village Stores before? Yes \_\_\_\_\_ No \_\_\_\_\_      Date left: \_\_\_\_\_

How were you referred to our company? \_\_\_\_\_

## EDUCATION

Type	Courses taken	Number Yrs. Completed	Diploma/Degree
High School	_____	_____	_____
College	_____	_____	_____
University	_____	_____	_____
Other	_____	_____	_____

Please list any additional information that relates to your ability to perform the job you are applying for - such as licenses, professional membership, hobbies, volunteer work, etc. \_\_\_\_\_

\_\_\_\_\_

## EMPLOYMENT RECORD

### PLEASE START WITH YOUR MOST CURRENT JOB.

**I** NAME AND ADDRESS OF YOUR CURRENT/MOST RECENT EMPLOYER:

POSITION OCCUPIED: \_\_\_\_\_ LENGTH OF EMPLOYMENT: FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME AND TELEPHONE NUMBER OF IMMEDIATE SUPERVISOR:

REASON FOR LEAVING: \_\_\_\_\_ SALARY/WAGE: \_\_\_\_\_

SUMMARY OF RESPONSIBILITIES: \_\_\_\_\_ MAY WE CONTACT?  
YES \_\_\_\_\_ NO \_\_\_\_\_

**II** NAME AND ADDRESS OF EMPLOYER:

POSITION OCCUPIED: \_\_\_\_\_ LENGTH OF EMPLOYMENT: FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME AND TELEPHONE NUMBER OF IMMEDIATE SUPERVISOR:

REASON FOR LEAVING: \_\_\_\_\_ SALARY/WAGE: \_\_\_\_\_

SUMMARY OF RESPONSIBILITIES:

**III** NAME AND ADDRESS OF EMPLOYER:

POSITION OCCUPIED: \_\_\_\_\_ LENGTH OF EMPLOYMENT: FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME AND TELEPHONE NUMBER OF IMMEDIATE SUPERVISOR:

REASON FOR LEAVING: \_\_\_\_\_ SALARY/WAGE: \_\_\_\_\_

SUMMARY OF RESPONSIBILITIES:

**IV** NAME AND ADDRESS OF EMPLOYER:

POSITION OCCUPIED: \_\_\_\_\_ LENGTH OF EMPLOYMENT: FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME AND TELEPHONE NUMBER OF IMMEDIATE SUPERVISOR:

REASON FOR LEAVING: \_\_\_\_\_ SALARY/WAGE: \_\_\_\_\_

SUMMARY OF RESPONSIBILITIES:

### REFERENCES

LIST THREE (3) REFERENCES OTHER THAN RELATIVES OR FORMER EMPLOYERS WHO HAVE KNOWN YOU WITHIN THE LAST THREE YEARS.

NAME	OCCUPATION
ADDRESS	TELEPHONE NO.
NAME	OCCUPATION
ADDRESS	TELEPHONE NO.
NAME	OCCUPATION
ADDRESS	TELEPHONE NO.

### AGREEMENT

I understand that the company will thoroughly investigate my work and personal history and will verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damages in providing this information. I agree to complete a fidelity bond application at the time of hire for purposes of insuring the company against theft or loss of money and securities. I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_