**Application for Employment**

Instructions: If completing this application by hand, please print. Only those individuals considered for an interview will be contacted. You will be required to provide a resume if contacted for an interview.

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| First Name |  | Middle Initial |  | Last Name |
| **First Name** |  | **Middle Initial** |  | **Last Name** |

 |
| **Address:** |

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| --- |
| Address |

 | **Apt. #:** |

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| --- |
| Apt. # |

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|  |
| **City:** |

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| --- |
| City |

 | **Province:** |

|  |
| --- |
| Province |

 | **Postal Code:** |

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| --- |
| PostalCode |

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|  |
| **Home #:** |

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| --- |
| Home # |

 | **Cell #:** |

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| Cell # |

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| **Email:** |

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| Email |

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| Position Applied For: |  |

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| --- | --- | --- |
| Choose an item. | If other, specify: | Specify |

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| How did you learn of this opening at CHIRS? | Click or tap here to enter text. |

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| --- | --- | --- | --- |
| When are you available to work? | [ ]  Full-time | [ ]  Regular Part-time/Weekends | [ ]  Overnights |
|  | [ ]  Shifts (Required for Full-time RF) |

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| Are there any limits to your availability? | Click or tap here to enter text. |

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| Have you worked for CHIRS before? |  | [ ]  Yes | [ ]  No |
| If yes, when and in what capacity?  | Click or tap here to enter text. |

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| Date available to begin work: | Click or tap to enter a date. |

|  |  |  |
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| Are you legally entitled to work in Canada? | [ ]  Yes | [ ]  No |
| Have you ever been convicted of a criminal offence for which you have not received a record suspension? | [ ]  Yes | [ ]  No |
| If the position for which you are applying requires a driver’s licence, do you currently possess a valid G Class Ontario Driver’s Licence in good standing? | [ ]  Yes | [ ]  No |
| Do you have valid vehicle insurance with at least $1 million liability coverage and have you been an insured driver for a minimum of 3 years? | [ ]  Yes | [ ]  No |

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| **EDUCATION / TRAINING**

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| --- |
| **Secondary School** |
|  | Name of Program |

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| --- |
| Click or tap here to enter text. |

 |
|  | Highest Grade/Level Completed |

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| Click or tap here to enter text. |

 |
|  | Title of Degree/Diploma |

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| Click or tap here to enter text. |

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| **College/University** Name of Institution: | Click or tap here to enter text. |
|  | Name of Program |

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| Click or tap here to enter text. |

 |
|  | Highest Grade/Level Completed |

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| Click or tap here to enter text. |

 |
|  | Title of Degree/Diploma |

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| Click or tap here to enter text. |

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| **Graduate/Professional** |
|  | Name of Program |

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| Click or tap here to enter text. |

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|  | Highest Grade/Level Completed |

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| Click or tap here to enter text. |

 |
|  | Title of Degree/Diploma |

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| Click or tap here to enter text. |

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| Describe any specialized training, courses, apprenticeship skills and/or extra-curricular activities: | Click or tap here to enter text. |
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**PRIOR EMPLOYMENT HISTORY**List in order, last or present employer first.

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| --- | --- |
| Name of Employer: | Click or tap here to enter text. |
| Type of Business: | Click or tap here to enter text. |
| Position Held: | Click or tap here to enter text. |
| Reason for Leaving: | Click or tap here to enter text. |
| Dates: | From |

|  |
| --- |
| Enter a date. |

 | To |

|  |
| --- |
| Enter a date. |

 |
| Salary/Wage: | Start |

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| --- |
| Enter text. |

 | Finish |

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| Click or tap here to enter text. |

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| Describe in detail the work you performed:Click or tap here to enter text. |

|  |  |
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| Name of Employer: | Click or tap here to enter text. |
| Type of Business: | Click or tap here to enter text. |
| Position Held: | Click or tap here to enter text. |
| Reason for Leaving: | Click or tap here to enter text. |
| Dates: | From |

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| Enter a date. |

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| Enter a date. |

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| Salary/Wage: | Start |

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| Enter text. |

 | Finish |

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| Click or tap here to enter text. |

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| Describe in detail the work you performed:Click or tap here to enter text. |

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| **PRIOR EMPLOYMENT HISTORY (Cont.)**

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| Name of Employer: | Click or tap here to enter text. |
| Type of Business: | Click or tap here to enter text. |
| Position Held: | Click or tap here to enter text. |
| Reason for Leaving: | Click or tap here to enter text. |
| Dates: | From |

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| Enter a date. |

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| Enter a date. |

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| Salary/Wage: | Start |

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| Enter text. |

 | Finish |

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| Click or tap here to enter text. |

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| Describe in detail the work you performed:Click or tap here to enter text. |

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| Name of Employer: | Click or tap here to enter text. |
| Type of Business: | Click or tap here to enter text. |
| Position Held: | Click or tap here to enter text. |
| Reason for Leaving: | Click or tap here to enter text. |
| Dates: | From |

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| Enter a date. |

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| Enter a date. |

 |
| Salary/Wage: | Start |

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| Enter text. |

 | Finish |

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| Click or tap here to enter text. |

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| Describe in detail the work you performed:Click or tap here to enter text. |

If additional space is required for a prior work history, you may attach a page providing only the information requested.Occasionally, a standardized application form makes it difficult for an individual to adequately summarize their complete background. To assist us in finding the proper position for you in our agency, please use the space below to summarize any additional information necessary to describe your full qualifications.

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| Click or tap here to enter text. |

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| **APPLICANT’S CERTIFICATION AND AGREEMENT**PLEASE READ CAREFULLYI hereby declare that the foregoing information is true and complete to my knowledge. I understand that a false statement may disqualify me from employment or cause my dismissal.I understand that, following a written offer of employment from CHIRS, I will be required to satisfactorily complete a pre-employment medical examination to demonstrate that I can safely and satisfactorily perform the duties of the position for which I am applying.It is understood that, as a condition of employment, I will be required to sign a Confidentiality Agreement.I hereby authorize CHIRS, or a firm retained by them, to verify the information on this Application and to conduct any other investigation relevant to my candidacy for employment at CHIRS.As I am applying for employment, CHIRS has my permission to use the information contained in thisApplication as part of their review process.

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| Click or tap here to enter text. |  | Click or tap here to enter text. |  | Click or tap here. |
| **Print Your Name** |  | **Signature** |  | **Date** |

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Thank you for completing this application and for your interest in employment with CHIRS.