

- Care Services _____
- Support Services _____
- Administration _____
- Other _____

Name: _____

Date: _____

Address: _____

Tele: _____ (h)

_____ (c)

Email: _____

Area applying for:

| Care Services | Support Services |
|---|--|
| <input type="checkbox"/> Resident Attendant | <input type="checkbox"/> Dietary Services / Cook |
| <input type="checkbox"/> LPN Registration # _____ | <input type="checkbox"/> Housekeeping |
| <input type="checkbox"/> RN Registration # _____ | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Therapeutic Recreation | <input type="checkbox"/> Laundry |
| <input type="checkbox"/> Rehab | <input type="checkbox"/> Utility |
| <input type="checkbox"/> Administration | <input type="checkbox"/> Other: _____ |

I have previously interviewed at York Care Centre

I have previously worked at York Care Centre

If yes, position: _____

Date: _____

Available start date: _____

Are you available for: Full time _____

hours available _____

Part time _____

hours available _____

Other _____

hours available _____

Are you available to work shift work: _____

Language:

1) Spoken _____

2) Spoken _____

Written _____

Written _____

Are you a: Canadian Citizen Permanent Resident

If not a permanent resident, I am in Canada on a:

Student Visa Post Grad Work Permit Work Visa Visitor Visa Expires on: _____

Have you ever been convicted of an offence for which a pardon was NOT granted? _____

If yes, what was the nature of the offence and sentence? _____

| Education | Date Completed | Level completed | Specialized Course taken |
|-------------|----------------|-----------------|--------------------------|
| High school | | | |
| College | | | |
| University | | | |
| Other | | | |

Employment History please list your most recent employer first (attach addition pages or resume if needed):

1.
Employer: _____ **Supervisor:** _____
Address: _____
Position: _____ **Reason for Leaving:** _____
Start Date: _____ **End Date:** _____

2.
Employer: _____ **Supervisor:** _____
Address: _____
Position: _____ **Reason for Leaving:** _____
Start Date: _____ **End Date:** _____

3.
Employer: _____ **Supervisor:** _____
Address: _____
Position: _____ **Reason for Leaving:** _____
Start Date: _____ **End Date:** _____

In addition to your education and work history, are there other skills, qualifications, or experience that we should consider?

Employment References:

| | Name | Employer | Province | Telephone |
|----------|-------------|-----------------|-----------------|------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| | | | | |

Do you know any current or past employees, if so, what is their name(s)? _____

Have you been referred by a current employee, if so, who? _____

I CERTIFY that the answers given herein are true and complete to the best of my knowledge. I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract of employment. In the event of employment, I understand that false or misleading information given on my application or throughout the interview process, may result in termination.

All information will be treated confidentially. Applications are kept on file for six (6) months. In the event you are extended an offer of employment, this form will be used as a permanent record.

Signature of applicant: _____ **Date:** _____