

# TOWNSHIP OF SEGUIN

**Form No. 21**

**(PLEASE PRINT  
LEGIBLY)**

## APPLICATION FOR EMPLOYMENT

Your application for employment will be considered should any vacancies occur that require your skills, for a period of ninety (90) days from the date of application. After the 90 day period has expired, you must complete and file a new application to be considered.

Position for which you are applying:

Date available to begin work:

### Personal Data

Name:

Home Phone:

Business Phone:

Address:

Email:

Are you legally eligible to work in Canada?  
( ) Yes ( ) No

Type of work being sought  
( ) full time ( ) part-time  
( ) temporary

Are you will to relocate?  
( ) Yes ( ) No

Minimum annual salary expected

Are you willing to consider an alternative position to the one applied for?  
( ) Yes ( ) No

Preferred location

### Education

(Do not include school names)

**Elementary or Secondary School:**  
Major subject area:

Highest grade or level achieved

Academic achievements or awards received

Type of diploma received:

Overall standing or average:

**Community College:**  
Name of Program:

Highest grade or level achieved:

Academic achievements or awards received

Length of Program:

Overall standing or average:

Type of certificate or diploma received:

**University:**  
Major subject:

Highest level completed:

Academic achievements or awards received

Length of program:

Overall standing or average:

Type of degree(s) received:

**Business, Trade or Technical School:**  
Name of Course:

Length of Program:

Skills required:

License, certificate or diploma received:

**Other:**  
List any other career-related workshops or seminars attended, including name of course, date taken and description of program:

### Employment History

Starting with your current or most recent employer, please provide us with the following information. You may attach a separate sheet.

Name, address and telephone number of employer	Type of business	Employed From: To:
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List all positions held with this employer, including dates during which each position was held:

Name and title of supervisor(s)	Final annual salary	Reason for leaving
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Duties/responsibilities including how often performed	List any significant achievements made or attained in this position
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Duties/responsibilities including how often performed	List any significant achievements made or attained in this position
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### Work Related Skills

Describe any of your work related skills, experience or training that relates to the position for which you are applying. Include any abilities in the use of machines, tools, equipment, computers, etc.

### Professional Development

List those activities that have assisted you in your career or professional development and state how each activity assisted you.

### References

For reference purposes, may we approach your present/last employer? ( ) Yes ( ) No Your former employer? ( ) Yes ( ) No  
List *job-related* references and telephone numbers if different from those listed as present and previous employers. (Exclude family members)

Please use the reverse of this page to provide any other information that would assist us in assessing your qualifications for this position. Do not include any information indicative of race, ancestry, place of origin, colour, ethnic, citizenship, creed, sex, sexual orientation, age, record of offences, marital status, family status or handicap.

***I understand that I may be required to provide legal proof of my ability to work in Canada and submit to a medical examination, if a condition offer of employment is made.***

***I certify that the information contained in this application is true and complete, to my knowledge. I understand that a false statement may disqualify me from my employment or cause my dismissal.***

***I authorize individuals, schools, current and previous employers named in this application to provide you with any relevant information you require, with the exception of any references refused above.***

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date