



APPLICATION FOR EMPLOYMENT

TELL US ABOUT YOURSELF

Check (✓) all that apply:

First Name: _____ Last Name: _____

Address: _____ City: _____ Prov: _____ Postal Code: _____

Home Phone: _____ Cell: _____ E-mail: _____

- Are you legally eligible to work in Canada?: Yes No
- Are you 19 years of age or older?: Yes No
- Citizenship: Canadian Citizen; Permanent Resident; other
- Level of school obtained: Grade 12 or equivalent; Post-Secondary; Current student
- Do you have relatives employed with AiMHi?: Yes No
- Have you ever committed a criminal offence and/or received a pardon? _____

POSITION

Position applying for: _____

Are you interested in: Full-time Part-time Casual Seasonal/ Temporary

How did you hear about this opportunity? _____

Were you referred by an AiMHi employee? Yes No; If yes, by whom? _____

AVAILABILITY

Date available to start (dd/mm/yyyy): _____

Indicate when you are available to be scheduled, with a "Y" for yes and an "N" for not available:

Shifts:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Day							
Evening							
Overnight							

Do you have any scheduled vacation plans or time off in the next 6 months to a year? Yes No

EDUCATION

Tell us the highest or equivalent level completed:

Institution type	Dates	Completion	Type of Certification/ Diploma/ Degree received
High School Year Completed			
Post-Secondary			

Do you have:		
Check (✓) all that apply		
A BC Drivers' Licence? Class # _____	Crisis Prevention training (CPI)	A reliable vehicle for work
An International Drivers' Permit?	Emergency First Aid with CPR "C" certification	FoodSafe

List other relevant qualifications, skills, volunteer work, life experiences, etc

EMPLOYMENT HISTORY

Current/ Last position Title: _____ Company name: _____

Responsibilities: _____

Dates of Employment: _____ Reason for leaving: _____

Supervisor Name: _____ Supervisor's contact number: _____ May we contact them? Yes No

Current/ Last position Title: _____ Company name: _____

Responsibilities: _____

Dates of Employment: _____ Reason for leaving: _____

Supervisor Name: _____ Supervisor's contact number: _____ May we contact them? Yes No

Current/ Last position Title: _____ Company name: _____

Responsibilities: _____

Dates of Employment: _____ Reason for leaving: _____

Supervisor Name: _____ Supervisor's contact number: _____ May we contact them? Yes No

REFERENCES

Provide the name and contact information for 2 job related and 1 personal reference

Name: _____ Position/ Company: _____ Phone: _____

Name: _____ Position/ Company: _____ Phone: _____

Personal Reference: _____ Relationship: _____ Phone: _____

DECLARATION I certify that the information on this application is correct and I understand that any misrepresentation or omission will result in my disqualification from consideration for employment. I authorize AiMHi to verify the information set forth on my application for employment and request background information from the references provided and I authorize all parties listed to supply information concerning my background to AiMHi.

Candidate's signature: _____ Date: _____