Norfolk Association for Community Living

644 Ireland Road

Simcoe, Ontario N3Y 4K2

(519) 426-5000

**APPLICATION FOR EMPLOYMENT**

**Position(s) Being Applied For:**

Administration

Residential Support

Casual Relief

Career

Family Home

Volunteer

Summer Employment

Full Time

Part Time

Are you legally eligible to work in Canada?

Yes

No

1. **PERSONAL DATA:**

Given Name(s):

Last Name:

Address:

Phone:

**B) EDUCATION:**

Years Completed:

Secondary:

College:

University:

Diploma(s) Awarded:

Degree(s) Awarded:

Other Courses, Workshops, Seminars, Training:

**PLEASE NOTE: WE ARE UNABLE TO PROCESS INCOMPLETE APPLICATIONS.**

1. **WORK RELATED SKILLS:**

Describe any of your work related skills, experience, or training that relate to the position being applied for.

1. **PERSONAL QUALIFICATIONS:**

Do you have a driver's license?

If yes, what class license?

Do you have access to a vehicle?

Have you ever worked for NACL before?

If yes, when?

Are you now employed?

Have you attended an Information & Recruitment Session?

If yes, date attended:

When would you be available to begin employment/volunteering?

**E) EMPLOYMENT HISTORY**

List your most recent place of employment on the top line with previous employment listed in sequence. Approximate dates will be acceptable.

1. Date Started Year/Month:

Date Left Year/Month:

Employer Name:

Address:

Phone Number:

Name of Supervisor:

Job Title:

Reason For Leaving:

1. Date Started Year/Month:

Date Left Year/Month:

Employer Name:

Address:

Phone Number:

Name of Supervisor:

Job Title:

Reason For Leaving:

1. Date Started Year/Month:

Date Left Year/Month:

Employer Name:

Address:

Phone Number:

Name of Supervisor:

Job Title:

Reason For Leaving:

**F) OTHER INFORMATION (Optional)**

Personal interests and activities:

**G) REFERENCES:**

For employment references, may we approach?

Your present/last employer?

Your former employer(s)?

Three (3) Work Related References:

1) Name:

 Address:

 Home Ph#:

Work Ph#:

2) Name:

 Address:

 Home Ph#:

Work Ph#:

3) Name:

 Address:

 Home Ph#:

Work Ph#:

**APPLICANT CERTIFICATION AND AGREEMENT**

(Please Read Carefully)

I 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.

Date:

Signature:

File: Application for Employment (May 2019)