



APPLICATION FOR EMPLOYMENT

We are an equal employment employer, we consider applicants for all positions without regard to race, colour, religion, sex or sexual orientation, national origin, age, marital or family status, conviction of an offence for which a pardon has been granted or the presence of a non-job-related medical condition or disability.

The more you write, the easier it is for us to know if you are going to fit within our company.
Attach extra paper as necessary.

Position Applied for: _____ Date: _____ Pay Rate Expected \$ _____ per _____

Applying for Full-time Part-time

How did you learn about us?

Advertisement Friend Walk-in Relative Employment Agency
 Other: _____ Our Web Site Employment Website

Have you worked for this company before? Yes No

If yes: which location? _____ from _____ to _____

Applicant Information:

Last Name: _____ First Name: _____ Initials: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: (home): _____ (office): _____ (other): _____

Are you of legal age? Yes No

Are you legally permitted to work in Canada? Yes No

If hired, do you have reliable transport to get to work? Yes No

Education and Training:

Please provide the following information about your education. (Include high school, trade and vocational schools, and universities):

School Name	Degree/Diploma	Address	Date Started	Date Completed

Special qualifications or certifications. (Include name of institution, start and completion date of program, grade achieved): _____

Please take completed resume to the Heritage Inn location you desire to apply to - thanks

Industry/Business training. (Include business and industry seminars and workshops):

Course: _____ Date taken: _____

Company or institution providing training: _____

What did you learn? _____

Course: _____ Date taken: _____

Company or institution providing training: _____

What did you learn? _____

Employment History (List in order, present or last employer first):

Company's Name	Address
Supervisor's Name	Telephone Number
Type of Business	Job Title
From: (Mo/Yr)	To: (Mo/Yr)
Job Duties	
Reason for leaving	
What would your employer say about you?	

May we contact your present employer? Yes No

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Supervisor's Name	Telephone Number
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Yes

No

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Supervisor's Name	Telephone Number
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No

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What, if any physical ailment do you have that would affect or prevent you from doing the job you are applying for?

What present situations affect your reliability/ability to do your job?

References:

Please give the names (excluding relatives) and telephone numbers of 3 people who can supply information pertaining to your character or job performance.

Name	Occupation	Telephone Number	Town/City

Personal History:

What are your special interests and activities?
What teams have you worked or played on?
What special knowledge and skills do you bring to this job?
What are your personal strengths?
What are your personal weaknesses?
What are your personal/career goals?
Why do you want this job?
Anything else you wish to tell us about yourself?

May we share your resume with our other companies?

Yes

No

By my signature on this application, I:

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- a. Authorize the verification of the above information and any other necessary inquiries that may be necessary to determine my suitability for employment.
- b. Affirm that the above information is true and complete to the best of my knowledge. I understand that any misleading or incorrect statements or the incomplete filing of this application may render the application void and, if employed, may be cause for dismissal.

Applicant's Signature: _____ Date: _____

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