



APPLICATION FOR EMPLOYMENT

Position Applied for: _____

Date of Application: _____

Fax: (780) 955-8623 **Email:** carmacks@carmacksent.com **Website:** www.carmacksent.com

PERSONAL INFORMATION (please print)

Name:		Last Name	First	Middle
Address:		Street Address	City or Town	Province Postal Code
Phone:		Home Business	Are you over the age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you willing to work out of town? <input type="checkbox"/> Yes <input type="checkbox"/> No

Education, Training and Certificates:

	Name of School	Grade or Certification Achieved	Year Started	Year Completed
High School				
University/College /Tech School				
Other Related Courses				
Trade Certificate No. (if applicable)	1. Trade _____ Certificate No. _____ Interprovincial <input type="checkbox"/> Yes <input type="checkbox"/> No 2. Trade _____ Certificate No. _____ Interprovincial <input type="checkbox"/> Yes <input type="checkbox"/> No 3. Trade _____ Certificate No. _____ Interprovincial <input type="checkbox"/> Yes <input type="checkbox"/> No			

For insurance and safety purposes, a driver's abstract is required.

Driver's Licence No. _____ **Class** _____

EQUIPMENT: What types of heavy equipment have you operated and how much experience do you have?

SAFETY TRAINING:

First Aid Certificate <input type="checkbox"/>	Exp. Date: _____	WHIMS <input type="checkbox"/>	Exp. Date: _____	Flagging Certificate <input type="checkbox"/>
Leaders Safety Excellence <input type="checkbox"/>	Construction Safety Training System <input type="checkbox"/>	Roadbuilder's Safety Training System <input type="checkbox"/>		
Other Safety Courses and Certifications:				

WORK HISTORY: List positions you have held. Begin with most recent position. Highlight experience related to the job you are applying for.

Employed From: _____ To: _____

Employer: _____

Address: _____ Phone: _____

Name of immediate supervisor: _____

Reason for leaving _____

Employed From: _____ To: _____

Employer: _____

Address: _____ Phone: _____

Name of immediate supervisor: _____

Reason for leaving _____

Employed From: _____ To: _____

Employer: _____

Address: _____ Phone: _____

Name of immediate supervisor: _____

Reason for leaving _____

REFERENCES:
 I authorize you to obtain references from my past and present employers/supervisors.

 Signature
You may give additional references, if you wish (please exclude relatives).

Name: _____ Address _____ Phone # _____ Yrs. Known _____

Name: _____ Address _____ Phone # _____ Yrs. Known _____

DECLARATION:

I certify that the statements made by me in this application are true and complete. I understand and agree that a false statement may disqualify me from employment or result in dismissal. I am aware that Carmacks Enterprises Ltd. has a Drug and Alcohol Policy.

 Applicant's signature

 Date