

Phone: (204)325-4316 • Fax: (204)325-5442 www.salemhome.ca

APPLICATION for EMPLOYMENT

To Applicant: We appreciate your interest in Salem Home Inc. A clear understanding of your background and work history will aid us in processing your application.

PERSONAL INFORMATION

Name		Telephone#	Em	ail	
Address					
Box No	. Street	City	Province	Postal Code	
☐ Licensed Practical Nurse		ested in? Please check those applica Cook Ward Clerk Therapeutic Recreation Attendant	ble: Support Services Nutrition Services Attendant Integrated Housekeeping Attendant Laundry Attendant		
☐ Other		·	•		
Plant Operations ☐Maintenance Worke	er				
Would you work: 🗖 F	Full-time 🗖 Part-tir	me 🗆 Casual 🗆 Days	☐ Evenings ☐ Nigh	nts	
Were you previously employed by us?					
Are you legally entitle	d to work in Canada?	☐ Yes ☐ No Indicate if English	is your first language	☐ Yes ☐ No	
Are you aware of any health or physical conditions that could affect performance on the job? If yes, please explain:					
If your application is considered favourably, on what date would you be available for work?					
Current cover letter & sections.	resume attached?	Yes ☐ No If no, please complete th	e following Education and	Employment History	
		EDUCATION			
School	Highest Level of Education Attained	Name of School & Cou	rse of Study	Did You Graduate?	
Junior High					
High School				☐ Yes ☐ No	
List all other relevant	training leading to a Ce	rtificate, Diploma or Degree			
Education Program	Date of Completion	Course of Stu	dy	Certificate/Degree/ Diploma Received	

- Note: 1. Health Care Attendant Certificate or Resident Care Attendant Certificate is required to work as a Resident Care Attendant.
 - 2. Food-Safe Handling Certificate is required to work in Nutrition Services or Therapeutic Recreation.

EMPLOYMENT HISTORY

List all present and past employment, beginning with your most recent employer

Employed From: To:	
	Type of Business:
	Your Supervisor:
Your Position & Duties:	
Reason for Leaving:	
May we contact for reference: ☐ Yes ☐ No If no,	please explain
Employed From: To:	
	Type of Business:
	Your Supervisor:
Reason for Leaving:	
Employed From:To:	
Employer:	Type of Business:
Employer: Telephone #:	Type of Business: Your Supervisor:
Employer:	Type of Business: Your Supervisor:
Employer: Telephone #: Your Position & Duties:	Type of Business: Your Supervisor:
Employer: Telephone #:	Type of Business: Your Supervisor:
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Are there any other experiences, skills or attributes which you feel would qualify you for work at Salem Home Inc.?
APPLICANT'S CERTIFICATION AND AGREEMENT
declare the foregoing information to be true and complete to the best of my knowledge and understand that any nisrepresentation or material omission is grounds for refusal to employ me, or, if I am employed, for dismissal with lause.
understand that an offer of employment may be conditional upon a medical certificate confirming my physical and nental fitness for the job. Should this examination reveal a condition which would prevent the satisfactory performance of the job duties, the offer may be withdrawn.
hereby authorize Salem Home Inc. to conduct a personal investigation in connection with my application for employment. As a part of that investigation, I authorize my current or former employers to release information egarding my record of employment, performance on the job, reason for leaving (if applicable) and other pertinent information.
Signature of ApplicantDate

Note: All applications for employment will be kept on file for a six-month time period. We thank you for your application. Only those individuals selected for an interview will be contacted.

EMPLOYER NOTES

IMPORTANT NOTICE: Legislation prohibits discrimination in employment practices because of age, ancestry, colour or ethnic background, creed, marital or civil status, family status, nationality, citizenship, national or social origin/condition, physical or mental disability/handicap, place of origin, record of offences, political opinion, race, religion, sex or sexual orientation, and any inquiries, verbal or written, which would require an applicant to disclose information about these areas, are strictly prohibited.