



920 Alness St, Suit 208  
TORONTO, ON, M3J2H7  
INFO@FINCHEMEMPLOYMENT.COM  
416.551.6111

## **JOB APPLICATION FORM**

First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

E-Mail: \_\_\_\_\_

City/ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Major Intersection: \_\_\_\_\_

Are you legally eligible to work in Canada? **Yes / No**

**POSITION APPLIED FOR:** \_\_\_\_\_

**OTHER POSITIONS CONSIDERED:** \_\_\_\_\_

**SPECIALIZED SKILLS:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are you currently employed? **Yes / No**

If **YES** may we inquire of your present employer? **Yes / No**

**AVAILABILITY:**      **FULL-TIME**      **PART-TIME**      **FREELANCE**

	DAYS	AFTS.	NIGHTS
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			
SATURDAY			
SUNDAY			

**HOW DID YOU FIND OUT ABOUT THIS POSITION?**

INDEED / MONSTER / GLASSDOOR / GOOGLE / SOCIAL MEDIA / OTHER \_\_\_\_\_

**LOCATION PREFERRED:** \_\_\_\_\_

Do you have access to reliable transportation? **Yes / No**

**EDUCATION HISTORY:**

<b>Name and Location of School</b>	<b>Years Attended</b>	<b>Degree Received</b>

**EMPLOYEE WORK HISTORY:**

Company Name: \_\_\_\_\_ Position held \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone number \_\_\_\_\_

Address: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Company Name: \_\_\_\_\_ Position held \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone number \_\_\_\_\_

Address: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Do you agree to have references contacted in relation to this application? **Yes / No**

**I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE.**

**APPLICANT SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_