

CANADIAN JOB APPLICATION FORM

Position Applied For: _____

Applicant Personal Information

Full Name: _____

Date of Birth (YYYY-MM-DD): _____

Social Insurance Number (SIN): _____

Phone Number: _____

Email Address: _____

Residential Address: _____

Street: _____

City: _____

Province: _____

Postal Code: _____

Employment Eligibility

Are you legally eligible to work in Canada? (Yes/No): _____

Do you require any accommodation due to a disability? (Yes/No): _____

Education

Highest Level of Education Completed: _____

Institution Name: _____

Field of Study / Major: _____

Employment History (Last 3 Positions)

Employer #1 Name: _____

Position / Title: _____

Start Date (YYYY-MM): _____ End Date (YYYY-MM or Present): _____

Reason for Leaving: _____

Employer #2 Name: _____

Position / Title: _____

Start Date (YYYY-MM): _____ End Date (YYYY-MM or Present): _____

Reason for Leaving: _____

Employer #3 Name: _____

Position / Title: _____

Start Date (YYYY-MM): _____ End Date (YYYY-MM or Present): _____

Reason for Leaving: _____

References (Not Related to You)

Reference #1 Name: _____

Relationship: _____

Phone Number: _____

Reference #2 Name: _____

Relationship: _____

Phone Number: _____

Reference #3 Name: _____

Relationship: _____

Phone Number: _____

Applicant Declaration and Consent

I hereby certify that the information provided in this application is true, complete, and correct to the best of my knowledge. I understand that any false statements or omissions may disqualify me from employment or lead to termination. I authorize the employer to verify all information provided and to conduct reference and background checks as permitted by Canadian law. I understand that this application is not a contract of employment and that employment, if offered, is at-will and may be terminated by either party at any time.

Applicant's Signature

Date

Signature: _____

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