

RECORD OF EMPLOYMENT: (last three positions held)

Position:	From: To:	Name of Employer:
Duties:		
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Duties:		
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Duties:		

Have you excluded any current or previous employers from the list above? Yes No

If yes, for what reason?

REQUIREMENTS FOR EMPLOYMENT:

Please note, successful applicants will be asked to apply for Criminal Record Check through the Solicitor General.

Do you possess the following?

1. Valid First Aid certificate? Yes No *Expiry Date:* _____

2. Tuberculosis screen? Yes No
(Within the last 12 months)

3. a. Valid BC Drivers licence? Class 7L Class 7N Class 5 Class 4 Other

b. If you have a Class 7 license, please indicate the date you will be eligible for your class 5 licence: _____

c. If you do NOT have a Class 4 license, are you willing to obtain one within 3 months of employment? Yes No

If no, please explain _____

4. Clear Driver's Abstract? Yes No

5. Clear Medical Assessment from your physician Yes No

REFERENCES:

(Please provide three references from previous employers (must have supervised you))

Employer	Address/Phone Number/E-mail	Name of Person to Contact

ON-CALL (CASUAL) AVAILABILITY:

1a. Select the shifts you are available for:

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Days							
Evenings							
Awake Nights							

2a. Do you anticipate a change to your availability in the near future?

Yes

No

b. If yes, please explain:

CERTIFICATE: *Note: this application is not valid unless signed by the applicant. Please read carefully before signing.*

I certify that the information provided in this application or attachment/resume is true and complete. I understand that if any information in this application or attachment/resume is found to be untrue and incomplete, my application may be rejected or I may be dismissed in the event that I am the successful applicant.

I understand that if hired by CLV, obtaining and providing the required documents listed on page 2, within two (2) weeks of my hire date is mandatory and a condition of my employment.

Signature: _____

Date of Application: _____