

External Application for Employment Opportunities

Competition Number:						
Please Note: Applications for employment must be for a current competition.						
Part I: Personal Information (please print)						
First Name:	Middle Name:	Last Name:				
Street:	•	City:				
Province:		Postal Code:				
Phone () Number:	Alternate Phone () Number:	E-Mail Address:				
 Are you legally entitled to work in Volunteers need not answer. You are legally entitled if you are a C immigrant or hold a work permit. 	Canada? anadian citizen, permanent resident/landed	Yes No				
Have you ever been employed by Library?	or volunteered for the Halifax Regior	nal Yes No				
If yes,						
Branch/Dept:	Dates - From:	То:				
Branch/Dept:	Dates - From:	To:				
Branch/Dept:	Dates - From:	То:				
Do you have an immediate family Board Member or Manager?	•	Yes No				
 Nepotism policy. "Immediate Family" is defined as spograndchildren. All of these relationshinterpretation (eg. In-law, common-la 	at the Halifax Public Libraries under HRL's cuse, parents, siblings, grandparents and clips shall be considered to have their broade w, same-sex common law, adoptive and ste amily" also includes an relatives living togeth	0				

Note: You may refer to an attached resume for Part II, III, IV and V

Part II: Employment History

A. Present or Most Recent Employer				
Employer Name:	Reason For Leaving:			
Type of Business:	Position Held:			
Period of Employment - From:	To:			
Address of Employer:				
Supervisor's Name:		Phone Number:		
Describe main duties and responsibilities:				
B. Previous Employers				
Employer Name:	Reason For Leaving:			
Type of Business:	Position Held:			
Period of Employment - From:	To:			
Address of Employer:				
Supervisor's Name:		Phone Number:		
Describe main duties and responsibilities:				
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Employer Name:	Reason For Leaving:			
Type of Business:	Position Held:			
Period of Employment - From:	То:			
Address of Employer:				
Supervisor's Name:		Phone Number:		
Describe main duties and responsibilities:		1		

Employer Name:				Reason Fo	r Leaving:		
Type of Business:				Position He	eld:		
Period of Employment	it - From: To:						
Address of Employer:							
Supervisor's Name:					Phone Number:		
Describe main duties a	nd responsibilities:					•	
Part III: Ed	ucation						
Level of Education	Degree/Diplom	a in	Degree/ Comp	/Diploma	Area of	Specialization	# of years Successfully Completed
Secondary							
Post-Secondary							
Post-Graduate							
Other (Night School, Correspondence, Trade School, Vocational, etc.)							
Part IV: Ac	quired Skills	6					
Keyboarding:		Word	Processing:			PC Software: (s	specify)
Tools and equipment: (specify:						
Other:							
Part IV: Oti	her Relevant	t Pra	ctical Sk	ills Not l	Mentior	ned Previo	usly

Part IV: Conditions of Employment

- I understand that if the position I am offered falls within a bargaining unit, membership is compulsory and union dues will be deducted. If employed, I agree to comply with the terms and conditions of employment as outlined in the appropriate collective agreement and/or the Human Resources policies and employment practices of the Halifax Regional Library.
- I understand that I will be required to show proof of the validity of my driver's license and/or professional Licenses, when such certification constitutes a job requirement.
- I understand that the operating hours of the Halifax Regional Library system vary and may include Saturday, Sunday, evening and standby scheduling, depending upon location and position.
- I agree to provide information identifying present and/or past employers to be approached for references. I understand that such references will be sought only after an interview. I authorize the Halifax Regional Library to make such inquiries and as deemed appropriate to the position for which I am applying.
- I agree that I will obtain a Police Record Check should I be so requested in furtherance of this application.
- Should I require a criminal records check I will provide the Halifax Regional Police or RCMP with
 personal information such as current and past addresses, previously used names and date and place
 of birth.
- I understand that the information the Halifax Regional Library receives from criminal records checks will be used only for the purpose of screening applications for this position and any HRL positions I might apply for in the future
- I understand misrepresentation made on this application, or on other documentation and/or tests
 related to employment will be sufficient cause for cancellation of my application and, if employed, for
 dismissal from the Halifax Regional Library.

Are you attaching additional information?	Yes	s No	
Applicant's Signature	Date (d/m/y)		