PC Mail Clients Only

Upper Clements Parks Employment Application

Personal Information		lication Date		Clements Parks	
Name:				12/Aug *	
Address:				Upper Clements Parks Annapolis Royal, Nova Scotia	
State/Province:				Box 577 Canada	
Zip/Postal Code:				B0S1A0 Phone: 902-532-7557	
Home Phone:			١	Fax: 902-532-7681 vww.upperclementsparks.com	
Cell Phone:					
email					
Have you previously a	pplied for a position at Upper Clemer	nts Park? \(\triangle Yes\)	○ No Year App	olied	
General:	Maintenance:	Food Service	Ad	ministrative	
Ride Operator		Short Order Cod			
(Requires min 1 ye experience)	(Mechanical and	Counter service		Onist	
Ride Attendant	General Carpentry Skills required)	Counter service		dministrative positions	
Life Guard	Classes.	Admissions		olied for when a vacancy sadvertised.	
Attendant	Cleaner	Admissions Cas			
Attendant			Shier Please do not use this form for submission to positions not listed.		
When available to begi	n work?	Supervisor			
Education					
Type of School	Name of School and City	/Town	Highest Year Comple	ted Year Graduated	
High School					
College Bus. or Trade School					
University					
Other					
Have you ever been co If yes, please explain	nvicted of a crime: yes no				
Have you completed a	Child Abuse Check Form:	 ∩ Yes ∩ No			
	,				
Do you have a drivers li	icense? yes no Provinc	e of issue:			
Do you have WHMIS	⊜Yes ⊜No Da	ate of Issue			

Г

Previous Employment (list up to 3)

1.	
Name of Employer:	
Name of last supervisor:	:
Dates of employment:	
From:	To:
Salary:	
From:	То:
Complete Address:	
Phone #:	
Last job title:	
Reason for Leaving (be s	specific):
List the jobs you held do	uties performed, skills used or learned, advancements, or promotions while you worked at this company:
List the Jobs you held, di	uties performed, skins used of feathed, advancements, or promotions while you worked at this company.
May we contact your em	nployer: yes no
2.	
Name of Employer:	
Name of last supervisor:	:
Dates of employment:	
From:	То:
Salary:	
From:	To:
Complete Address:	
Phone #:	
Last job title:	
Reason for Leaving (be s	specific):
List the jobs you held, do	uties performed, skills used or learned, advancements, or promotions while you worked at this company:
May we contact your em	nployer: () yes () no

5.								
Name of Employer:								
Name of last supervisor:								
Dates of employment:								
From:		To:						
Salary:								
From:		To:						
Complete Address:								
Phone #:								
Last job title:								
Reason for Leaving (be s	nacific):							
reason for Leaving (be s	pecific).							
List the jobs you held, du	ıties nerformed	l skills used (or learned, ad	vancements	or promotions	while you wo	orked at this comp	anv [.]
List the jobs you held, du	ides periorined	a, skiiis asca k	or rearried, ad	varicements	or promotions	wille you we	inca at tins comp	<u>y.</u>
May we contact your em	ployer: () ye	es 🔵 no						
Skills:								
Typing:								
Computer: OPC	○ Mac ○	Both						
Applications (list all that	apply):							
Other Skills:								
				- •		•		
Please list 2 re	eterences	s other	than rel	atives a	and prev	ious em	ployers	
Name								
Position								
Company								
Telephone								
Use this space to add any	/ additional inf	ormation ned	cessary to des	cribe your fu	ll qualifications	for the posit	ion which you are	applying: