



PO BOX 1090
15121 TWP RD 1055
LA CRETE, AB T0H 2H0
PHONE: 780-928-2292
FAX: 780-928-2288
EMAIL: office@lacretesawmills.com

APPLICATION FOR EMPLOYMENT

Personal

Name: _____
(Last) (First) (Middle)

Address: _____ City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____ Other: _____

Have you worked with us before? Yes No If yes, when approximately? _____

Age: _____ Do you have reliable means of transportation to get to work? Yes No

Are you looking for full-time or part-time employment? _____

When would you be available to start work? _____

Job(s) Applying For: 1) _____ Rate of Pay Expected \$ _____ per hour
2) _____ Rate of Pay Expected \$ _____ per hour

Education

School Attended: _____ Grade/Level Completed: _____

College/University Attended & Field of Study (If Applicable): _____

Do you speak English? Yes No Do you speak German? Yes No

Can you read and write English? Yes No

Do you have any other training or certification? Please specify (ex. First Aid, WHMIS, etc.)

Employment History

Employer: _____	Reason for Leaving: _____
Name of Supervisor: _____	Job Title & Duties: _____
Phone Number: _____	_____
Date of Employment: _____	_____
Start: _____ End: _____	_____

Employment History (continued)

Employer: _____
Name of Supervisor: _____
Phone Number: _____
Date of Employment:
Start: _____ End: _____

Reason for Leaving: _____
Job Title & Duties: _____

Employer: _____
Name of Supervisor: _____
Phone Number: _____
Date of Employment:
Start: _____ End: _____

Reason for Leaving: _____
Job Title & Duties: _____

References

Name: _____ Address: _____ Phone Number: _____

Relation: _____ Employer: _____

Name: _____ Address: _____ Phone Number: _____

Relation: _____ Employer: _____

Name: _____ Address: _____ Phone Number: _____

Relation: _____ Employer: _____

Optional Information

Marital Status: Single Married Common-Law Separated/Divorced

Do you have any dependents? Yes No If yes, how many? _____

Do you have any relatives currently employed at La Crete Sawmills? Yes No

Contact person in case you are unavailable: _____ Phone: _____

Required Information

Have you ever been convicted of a criminal offense? Yes No

Are you legally permitted to work in Canada? Yes No

Thank you for completing this application form and for your interest in employment with us. Your application will be considered for 90 days. If an opening for employment becomes available you may be contacted for an interview.

APPLICANT'S CERTIFICATION AND AGREEMENT - PLEASE READ CAREFULLY

I hereby certify that the information in the above application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant: _____

Date: _____