



Meadowood Manor

Personal Care Home • Elderly Persons Housing
577 St. Anne's Road • Winnipeg, Manitoba • R2M 5B2
Phone: (204) 257-2394 • Fax: (204) 254-5402

APPLICATION FOR EMPLOYMENT

SURNAME: _____ GIVEN NAMES: _____

POSITION APPLIED FOR: _____

Address: _____ Telephone: Home: _____
Business: _____

Are you in good health? _____ List mental/physical limitations which may affect your ability to perform all duties of the position applied for - on the reverse of this application under "other pertinent information".

Are you willing to supply a Doctor's certificate of fitness for this position? _____

Have you ever been convicted of a criminal offence? _____

If yes, please list offence and year under "other pertinent information."

Number of days off work for illness during the past year? _____ Comments: _____

Are you legally entitled to work in Canada? _____ What languages do you speak? _____

Read? _____ Write? _____

Highest General Education Standing Obtained? _____

Professional or Technical Qualifications (specify): _____

Type of Employment desired: Full-time Part-time Casual

Term Summer only

Shift preferred Days Evenings Nights

Would you be able to work weekends? Yes No

Owned and Operated by The Manitoba Baptist Home Society Inc.

Employment History: Please list LAST FIVE positions, starting with your PRESENT or most recent one.

DATES FROM TO	COMPANY NAME & ADDRESS	DEPARTMENT & TYPE OF WORK	SALARY	REASON FOR LEAVING

REFERENCES: Give full particulars of three persons, other than Relatives who can be contacted for references.

NAME	ADDRESS	PHONE	OCCUPATION	RELATIONSHIP
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Other pertinent information: _____

I hereby certify that, to the best of my knowledge, the information given above is true and complete, and I understand that the giving of false information is sufficient reason for termination of employment. I hereby consent to Meadowood Manor verifying all information given and obtaining information from the sources listed in this application.

Date: _____ Signature: _____

(c-appliemp.doc)