

# APPLICATION FOR EMPLOYMENT - Canada

**An Equal Opportunity Employer**

APD Printing Inc. does not discriminate. Our policy is to provide equal opportunities to all qualified applicants and employees without regard to age, race, colour, religion, sex, place of origin, disability, or other factors. We advise that we intend to verify and hold you, the applicant, responsible for the accuracy of statements you make on this application.

**PLEASE PRINT IN INK AND COMPLETE THE FOLLOWING IN FULL**

## PERSONAL

Application Date: \_\_\_\_\_

Specific Title of Position(s) Applied for: \_\_\_\_\_

Type of work desired:  Full Time  Part Time  On Call/As Needed Location: \_\_\_\_\_

Name: \_\_\_\_\_  
*Last First Middle*

Present Mailing Address: \_\_\_\_\_  
*Street City State Postal Code*

Permanent Mailing Address: \_\_\_\_\_  
*Street City State Postal Code*

Number of Years at Present Address: \_\_\_\_\_ Number of Years at Permanent Address: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Business/Cell \_\_\_\_\_ Email \_\_\_\_\_

Date available to begin work: \_\_\_\_\_ Are you over 18 years of age?  Yes  No

Salary Desired: \$ \_\_\_\_\_ per year \$ \_\_\_\_\_ per hour

Willing to Relocate?  Yes  No Willing to Travel?  Yes  No Willing to work Overtime?  Yes  No

Are you legally entitled to work in Canada?  Yes  No

Have you ever held a security clearance?  Yes  No Type: \_\_\_\_\_ Active:  Yes  No

Have you ever worked for APD? List dates/Location(s): \_\_\_\_\_

Do you have any relatives employed by APD?  Yes  No

If yes: Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Job title \_\_\_\_\_ Work Location \_\_\_\_\_

Have you ever pled been convicted of a criminal offense for which a pardon has not been granted?  Yes  No

If Yes, please provide specific information about the offense and the circumstance of the conviction, dates, details, etc.  
(Answering "Yes" to this question does not constitute an automatic bar to employment. Factors such as date of offense, seriousness and nature of violation, rehabilitation and position applied for will be taken into consideration. However, be aware that answering "No" to the Question if you have been convicted of a criminal offense for which a pardon has not been granted may be regarded as a dishonest act, which could result in the termination of your employment.)

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## GENERAL

Are you able to perform the duties of the position(s) applied for with or without reasonable accommodation?  Yes  No

Do you have any existing non-compete or non-disclosure agreements in effect?  Yes  No

If yes, state the parties involved in the agreements. \_\_\_\_\_

How did you learn about this job? \_\_\_\_\_

Classified As: Name of publication \_\_\_\_\_

Internet: APD website or other \_\_\_\_\_

Employment Agency \_\_\_\_\_

Walk-In

Employee Referral \_\_\_\_\_

Referred by \_\_\_\_\_

Other \_\_\_\_\_

## REFERENCES

List three business/work references that are not related to you and not shown as a supervisor under the employment history section. If not applicable, list three school or personal references, not related to you. **Please list Name, Title, Address, Telephone Number, and Years Known.**

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## EDUCATIONAL HISTORY

High School: \_\_\_\_\_

*Name and Location*

*# of years completed*

*Graduated?*

College / University / Trade School / Etc.

School Name and Location	Major/Minor	From / To	Graduated?	GPA
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

## OTHER SKILLS AND QUALIFICATIONS

Summarize any special training, skills, licenses, publications, and/or certifications acquired from employment or other experiences that may qualify you as being able to perform job-related functions in the position for which you are applying. State professional licenses and certification dates, expiration and granting/authority body.

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List all languages in which you are fluent: \_\_\_\_\_

## EMPLOYMENT HISTORY

Please provide employment information for your current and past employers, starting with the most recent. Explain any gaps of employment in the comment section below (Use additional sheet if necessary).

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Position Held: \_\_\_\_\_

Immediate Supervisor/Manager and Title(s): \_\_\_\_\_

Dates employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Job Summary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact for reference?  Yes  No  Later

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Position Held: \_\_\_\_\_

Immediate Supervisor and Title: \_\_\_\_\_

Dates employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Job Summary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact for reference?  Yes  No  Later

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Position Held: \_\_\_\_\_

Immediate Supervisor and Title: \_\_\_\_\_

Dates employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Job Summary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact for reference?  Yes  No  Later

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Position Held: \_\_\_\_\_

Immediate Supervisor and Title: \_\_\_\_\_

Dates employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Job Summary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact for reference?  Yes  No  Later

Comments: \_\_\_\_\_

## **APPLICANT STATEMENT**

I certify that all information I have provided in order to apply for and secure employment is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete, omitted, or misrepresented in any respect, will be sufficient cause to cancel further consideration of this application, or immediately discharge me from employment whenever it is discovered.

I hereby authorize, without reservation, APD Printing Inc., its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview.

I hereby waive any and all rights and claims I may have regarding APD Printing Inc., its agents, employees or representatives, for seeking, gathering and using such information in the employment process and various corporation corporations or organizations for furnishing such information about me.

Furthermore, I understand that this application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of APD Printing Inc., has the authority to make any assurances to the contrary. I affirm that I have a genuine intent and no other purpose in applying for a job with this company.

I understand that APD Printing Inc. does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment.

This application is current for (12 months) one year. At the conclusion of this time, if I have not heard from APD PRINTING Inc., and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

**Signature of  
Applicant** \_\_\_\_\_

**Date** \_\_\_\_\_