EMPLOYMENT APPLICATION

	Date available to begin wor	К:	Employment Desired:				
			Part-Time	🗌 Full-Time			
Position being applied for:							
Preferred Location (1 st Choice):		Preferred L	ocation (2 nd Choice):				

Personal Information												
Last Name					First Name				Initial			
Street Address						Apt. No.						
City					Province				Postal Code			
Home Telepho ()	ne No.	Work Telephone No. () Ext.										
Are you legally eligible to work in Canada? Yes/No												
Have you ever been convicted of a criminal offence involving theft, fraud or other similar offences for which you have not been pardoned? Yes/No												
If applicable, are you eligible to serve liquor in the province that you are applying to work in? Yes/No (British Columbia, Saskatchewan, Nova Scotia, NFLD & Labrador, PEI, New Brunswick, Inuvik– 19 years old, Alberta, Manitoba, Ontario, Quebec – 18 years old)												
Have you ever been employed at a Pizza Hut, KFC, Taco Bell restaurant? Yes/No If yes, where?												
Who was your	3											
Hours Availab	Available Mon Tues			Wed		Thurs	Fri	-ri Sat		Sun		
From:		1400	Wea							oun		
To:												
Education												
Name Levels			Levels of Completio	No. of Years Attended		Did you graduate?		Degree Received				
Employment												
Employment Company: Address:				Name of Supe			ervisor:					
Position/Duties Performed: Reason for Leaving			Leaving:	Employed From:			rom:	To:				
Phone No. ()				Starting Pay: \$					Ending Pay: \$			
Company: Address:				Name of Supervisor:								
Position/Duties Performed: Reason for Leaving			Leaving:	Employed From:			rom:	To:				
Phone No. ()			()	Starting Pay: \$: \$	Ending Pay: \$				
Personal References (not former employers or relatives, exclude Ministers of religion)												
Name: Relationship or Title:						Phone No. ()						
Name:		Relationshi	p or Title:		Phone No. ()							
Signature I certify that the above information is correct and understand that falsification is grounds for termination with cause. I authorise the references, supervisors, and educational institutions listed above to give you any information concerning my prior employment or education. I understand that you, as my potential employer, are collecting my personal information on this form and from the references, supervisors and educational institutions listed above to determine my suitability for the position I have applied for and, if I am hired, for the purpose of our employment relationship. I understand and agree that you, as my potential employer, will use and disclose my personal information only for those purposes or as permitted or required by law. By signing this form, I consent to the collection, use and disclosure by you, as my potential employer, of my personal information for these purposes. Name:												
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			FILL OUT	BELOW AT TIME OF	HIRE O	NLY					
Social Insurance No.				Sirthdate:	Langu	age:		Proficiency Level:			
	🗌 F 🗌	🗌 F 🔲 Single		MM/DD/YY				Verbal			
	M Married						Written				
Emergency Contact:											
First & Last Name:			Relationship:					Telephone No.			
Address:			City:					Province:	: Postal Code:		
Hire Information – For Su		nly									
Effective Date:	Store #		Job Code	Job Title:			Hourly		Rates		
						H	Salaried	(1)	(2)	(3)	
ATTACH COMPLETED TD1 FORM TO CLAIM ANY TAX RELATED CREDITS											
Authorizations											
Restaurant General Mana	iger										
·											
Please Print			Signature					Date			