

Mountain View School Division

Application for Employment



Personal Information

Legal Surname:		Given Names:	
Address:			
City/Town:	Province:	Postal Code:	
Email Address:			
Home Number:		Cell Number:	
Are you bondable? <input type="checkbox"/> YES <input type="checkbox"/> NO		Are you legally allowed to work in Canada? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Highest Level of Education Completed: Grade: <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 Post Secondary: <input type="checkbox"/>		Date Obtained or Date Expected to Graduate:	
Certifications or Licensures: <i>(Please provide photocopies)</i>			
Do you have a Valid Driver's License? <input type="checkbox"/> YES <input type="checkbox"/> NO If so, what Class do you hold? _____			
Have you previously been employed by Mountain View School Division? <input type="checkbox"/> YES <input type="checkbox"/> NO			
Have you been interviewed by Mountain View School Division before? <input type="checkbox"/> YES <input type="checkbox"/> NO			

Position Applying For

Bus Driver <input type="checkbox"/>	Educational Assistant <input type="checkbox"/>	Maintenance <input type="checkbox"/>
Food Services Asst. <input type="checkbox"/>	Secretary <input type="checkbox"/>	Library Assistant <input type="checkbox"/>
Custodial <input type="checkbox"/>	Non-Qualified Teacher Sub <input type="checkbox"/>	Other <input type="checkbox"/> :
Full Time: <input type="checkbox"/>		
Part Time <input type="checkbox"/>		Substitute <input type="checkbox"/>
Posting # (If applicable):		

Skills and Abilities

**Please use this space to elaborate on any skills and/or abilities that would be of interest to us in considering you for this position.*

Languages	Speak	Read	Write	Understand
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Employment History

**Please list your last three employers beginning with your most recent position.*

Organization:		City/Town:	
Position:			
Dates Employed:	From (mm/yyyy):	To (mm/yyyy):	
Reason for Leaving:			
Organization:		City/Town:	
Position:			
Dates Employed:	From (mm/yyyy):	To (mm/yyyy):	
Reason for Leaving:			
Organization:		City/Town:	
Position:			
Dates Employed:	From (mm/yyyy):	To (mm/yyyy):	
Reason for Leaving:			

References

**Please ensure references listed below have been notified they are being used*

Name:		Phone Number:	
Company/Occupation:		Email Address:	
Name:		Phone Number:	
Company/Occupation:		Email Address:	
Name:		Phone Number:	
Company/Occupation:		Email Address:	

Do you give Mountain View School Division permission to contact the above references? YES NO

I hereby certify that the information given in this application is true, correct, and complete, to the best of my knowledge. I understand that falsified or misleading statements and omissions will result in rejection of this application, and, if employed, may be cause for my termination. I also understand that employment with the Division is conditional upon the results of a Criminal Record Check and a clear report from the Provincial Child Abuse Registry.

I hereby authorize MVSD to conduct a personal investigation in connection with my application for employment.

Signature of Applicant _____

Date: _____