

Community Futures Development Corporation of the North Cariboo
Application For Employment

Name _____ Address _____

Phone _____ E-mail _____

Position applied for _____ Date _____

BUSINESS/WORK EXPERIENCE (please start with your most recent position):

A. Company name _____

City _____ Province _____ Phone _____

Type of business _____ Employed from _____ to _____
(show months as well as years)

Title _____ Starting wage/salary \$ _____ Ending wage/salary \$ _____

Name and Title of immediate Supervisor _____

May we contact your Supervisor for a reference Yes () No ()

Comment _____

Nature of work _____

Reason(s) for leaving _____

B. Company name _____

City _____ Province _____ Phone _____

Type of business _____ Employed from _____ to _____
(show months as well as years)

Title _____ Starting wage/salary \$ _____ Ending wage/salary \$ _____

Name and Title of immediate Supervisor _____

May we contact your Supervisor for a reference Yes () No ()

Comment _____

Nature of work _____

Reason(s) for leaving _____

C. Company name _____

City _____ Province _____ Phone _____

Type of business _____ Employed from _____ to _____
(show months as well as years)

Title _____ Starting wage/salary \$ _____ Ending wage/salary \$ _____

Name and Title of immediate Supervisor _____

May we contact your Supervisor for a reference Yes () No ()

Comment _____

Nature of work _____

Reason(s) for leaving _____

EDUCATION:

A. High School

Name of High School _____ Location _____

Dates (mo./yr.) attended from _____ to _____ If graduated, month and year _____

Final grade point average _____

Offices, honors/awards: _____

B. Post-secondary

Dates (mo./yr.) attended _____ If graduated, month and year _____

Length of program _____ yrs. Final grade point average _____

Name of degree/diploma/certificate granted _____

Offices, honors/awards: _____

C. Other courses/training: _____

My signature below certifies that all information on this application is correct and complete to the best of my knowledge and belief and that I understand that intentionally false information could result in refusal of employment or discharge. I also authorize employers, schools or persons named above to provide information regarding my employment, education, character and qualifications.

Signature

Date