Please complete the requested information below (print or type).

|  |
| --- |
| **Section 1: Applicant Information** |
| First and last name: |
| Address: |
| City: | Province: | Postal code:  |
| Primary number: ( ) | Cell phone number: ( ) |
| E-mail address: |
| Have you ever interviewed with enVision Community Living in the past?   [ ]  Yes [ ]  NoIf yes: Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date interviewed (mm/yy) \_\_\_\_\_\_\_\_\_\_\_\_  |
| Have you worked for us before?  [ ]  Yes [ ]  NoIf yes: Location\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| If hired, what is the earliest date you are available for employment? |
| Rate of pay expected: |
| **Section 2: Position(s) Applied For** |
| Name of Position(s): |
| [ ]  Full-time [ ]  Part-time [ ]  Casual [ ]  Temporary or seasonal |
| Please provide your weekday hours availability below (your unavailability to work on any particular day will not necessarily disqualify you from employment with enVision Community Living). |
|   | All Days | Mon | Tues | Wed | Thurs | Fri | Sat | Sun |
| Morning |   |   |   |   |   |   |   |   |
| Afternoon |   |   |   |   |   |   |   |   |
| Evening |   |   |   |   |   |   |   |   |
| Night |   |   |   |   |   |   |   |   |
| **Section 3: Education** |
| **Type of School** | **Highest Grade or Year Completed** | **Graduated** | **Name of School and Course of Study or Major** |
| **Yes** | **No** |
| High school or equivalent |  9 10 11 12  |   |  |   |
| College  |   |   |  |   |
| University |   |   |  |   |
| Vocational or trade school |   |   |  |   |
| Other |   |   |  |   |
| List any other certifications or licenses you currently possess:*
*
 |
| **Section 4: Work History** |
| [ ]  Please see attached resume ***or*** |
| Start with your most recent employer. You may include, as part of your employment history, any work performed on a volunteer basis. |
| **Position One** |
| Employer name: |
| Employer phone number: |
| Start date (mm/yy): | End date (mm/yy): |
| What was your position or job title? |
| What were your duties or responsibilities in this position?    |
| Reason for leaving?  |
| May we call your current/previous supervisor? [ ]  Yes [ ]  No | Supervisor name: |
| Phone number: |
| **Position Two** |
| Employer name: |
| Employer phone number: |
| Start date (mm/yy): | End date (mm/yy): |
| What was your position or job title? |
| What were your duties or responsibilities in this position?     |
| Reason for leaving?  |
| May we call your current/previous supervisor? [ ]  Yes [ ]  No | Supervisor name: |
| Phone number: |
| **Position Three** |
| Employer name: |
| Employer phone number: |
| Start date (mm/yy): | End date (mm/yy): |
| What was your position or job title? |
| What were your duties or responsibilities in this position?     |
| Reason for leaving?  |
| May we call your previous supervisor? [ ]  Yes [ ]  No | Supervisor name: |
| Phone number: |
| If you wish to add additional positions to your employment history, please attach on a separate sheet of paper. |
| **Section 5: References** |
| **Reference One** |
| Name: |
| Employer: | Position: |
| Phone Number: | Email: |
| **Reference Two** |
| Name: |
| Employer: | Position: |
| Phone Number: | Email: |
| **Reference Three** |
| Name: |
| Employer: | Position: |
| Phone Number: | Email: |
| **Section 6: Other Information** |
| Are there any other experiences or qualifications not already listed above, which would be beneficial to your work with our organization? |
| What motivated you to apply for a position with enVision? |
| **Section 7: Applicant Acknowledgement and Signature** (*please read carefully before signing*) |
| I hereby authorize representatives of enVision Community Living to contact my references listed on this form and/or my previous employer(s). enVision Community Living may obtain information concerning my past employment history, performance and/or any other information relevant to my employment at enVision Community Living.I hereby certify that the information provided in this applications and any attachments, including my resume, are true and complete. I understand that if any information in this application or its attachments are found to be untrue or incomplete, my application may be rejected or I may be terminated for just cause, if I am the successful applicant. |
| **Applicant Signature:** |   |
| **Date Signed (dd/mmm/yyyy):** |  |