



Application for Employment (valid for 60 days)

Fax: (780) 917-7886; E-mail: careers@edmonton.com; Website: www.shawconferencecentre.com
 Address: Shaw Conference Centre, 9797-Jasper Ave., Edmonton, AB T5J1N9

PERSONAL	
<input type="checkbox"/> Mr. <input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. _____ <div style="display: flex; justify-content: space-between; width: 80%; margin-left: 100px;"> First Name Last Name </div>	
CURRENT ADDRESS: _____	
Postal Code _____	
HOME PHONE: _____ CELL PHONE: _____	
E-MAIL: _____	
POSITION APPLIED FOR: _____ RATE OF PAY EXPECTED: _____/HOUR	
WOULD YOU WORK: <input type="checkbox"/> FULL-TIME or <input type="checkbox"/> PART-TIME	
AVAILABILITY (days & hours): _____	
PLEASE LIST THE LANGUAGES THAT YOU'RE FLUENT WITH: _____	
PREVIOUSLY EMPLOYED BY US? <input type="checkbox"/> YES <input type="checkbox"/> NO, IF YES, WHEN _____	
WHEN CAN YOU START: _____	
ARE YOU LEGALLY PERMITTED to WORK IN CANADA: <input type="checkbox"/> YES <input type="checkbox"/> NO	
ARE YOU 15 YEARS OF AGE or OLDER: <input type="checkbox"/> YES <input type="checkbox"/> NO	
DO WE HAVE YOUR CONSENT TO CONDUCT A SECURITY CLEARANCE CHECK: <input type="checkbox"/> YES <input type="checkbox"/> NO	

EMPLOYMENT HISTORY			
NAME & ADDRESS of COMPANY	PERIOD OF EMPLOYMENT	POSITION / DUTIES	REASON FOR LEAVING

EMPLOYMENT REFERENCES			
NAME	COMPANY	POSITION	PHONE

EDUCATION & TRAINING

SCHOOL	FIELD OF STUDY	GRADUATED (if not, which grade are you in)	DIPLOMA or DEGREE
HIGH			
UNIVERSITY or COLLEGE			
BUSINESS or TRADE			

HOW DID YOU FIND OUT ABOUT THIS JOB OPPORTUNITY:

- ONLINE (which website _____)
- NEWSPAPER (which one _____)
- JOB FAIR (which one _____)
- EMPLOYEE REFERRAL (employee's name _____)
- OTHER (please specify _____)

CONDITIONS of EMPLOYMENT --- please read carefully

I certify that the statements made by me in this application are true and complete. I understand and agree that a false statement may disqualify me from employment or result in dismissal. I agree that Edmonton Economic Development Corporation and/or the Shaw Conference Centre may verify my work history and other information and those that have such information are free to give it. I understand that my employment would begin with a period of probation. If employed, I agree to abide by all existing rules and regulations of the Edmonton Economic Development Corporation and/or the Shaw Conference Centre and any established thereafter.

APPLICANT'S SIGNATURE

DATE OF APPLICATION

Information is collected under authority of the Alberta Freedom of Information and Protection of Privacy Act (FOIPP), Section 33C. The information included in this application will be used to determine the applicant's qualifications and suitability for employment in the position applied for. You may be asked to substantiate statements made. The records arising from this competition will be managed in accordance with provisions of FOIPP.

FOR OFFICE USE ONLY

EMPLOYMENT DATA --- TO BE COMPLETED ONLY AFTER HIRING

Date of Birth: _____	Marital Status: <input type="checkbox"/> single <input type="checkbox"/> married	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	Rate: _____	Employee No. _____
Name:		Gender:		
Department:		SIN:		
Date Interviewed:		Position:		
Remarks:				
Effective Start Date:				
Department Head:			Personnel:	