

EDUCATION BACKGROUND

	NAME / LOCATION OF SCHOOL	GRADE/YEAR COMPLETED or DATE GRADUATED	DEGREE
HIGH SCHOOL			
POST SECONDARY			
OTHER			

WORK AND/OR SIGNIFICANT VOLUNTEER HISTORY (Begin with most recent experience)

DATES FROM: TO:	NAME OF EMPLOYER/ ORGANIZATION	SUPERVISOR'S NAME & TITLE	TELEPHONE #
DESCRIBE THE WORK YOU DID:			
DATES FROM: TO:	NAME OF EMPLOYER/ ORGANIZATION	SUPERVISOR'S NAME & TITLE	TELEPHONE #
DESCRIBE THE WORK YOU DID:			
DATES FROM: TO:	NAME OF EMPLOYER/ ORGANIZATION	SUPERVISOR'S NAME & TITLE	TELEPHONE #
DESCRIBE THE WORK YOU DID:			

May we contact the above mentioned employers/organizations? Yes No

If not, include which one(s) you do not wish us to contact _____

Do you have WHMIS Training? Yes No Do you have Emergency First Aid & CPR? Yes No

If yes, please include a copy of certification(s).

PERSONAL REFERENCES

Give the names of 3 individuals who can refer to your studies, employment or volunteer work (excluding relatives).

NAME & OCCUPATION	RELATIONSHIP TO YOU	PHONE #
1.		
2.		
3.		

I hereby confirm that all of the contents of this application are true and accurate, and I acknowledge that the Town of Pictou may verify each particular. I further authorize the release to the Town of Pictou of any information verifying the contents of this application, including the release by any relevant police authority of information concerning any record of offenses.

Feel free to attach a resume or other pertinent information to this application.

Signature of Applicant: _____ Date: _____