



Dr. V. A. Snow Centre Inc.

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APPLICATION FOR EMPLOYMENT

We appreciate your interest in our organization and we are sincerely interested in your qualifications. Please fill out this form completely, to aid us in placing you in the position that best meets your qualifications and may assist us in future upgrading. Please note that this application will be retained for a period of one year only.

NAME: _____

PHONE: _____ EMAIL: _____

MAILING ADDRESS: _____

POSITIONS APPLIED FOR: 1) _____
 (in order of preference) 2) _____
 3) _____

RATE OF PAY EXPECTED: _____ FULL TIME PART-TIME

ARE YOU AVAILABLE FOR ALL SHIFTS: _____ YES NO

WERE YOU PREVIOUSLY EMPLOYED BY US? _____ IF SO WHEN? _____

WHAT DATE WOULD YOU BE AVAILABLE TO BEGIN WORK? _____

RECORD OF EDUCATION

SCHOOL	COURSE	YEARS ATTENDED	DIPLOMA / CERTIFICATE
High School			
Post-Secondary			
University			
Other			

**TRAINING & DEVELOPMENT
 EXTENDED LEARNING**

COURSE / SEMINAR	DATE	DESCRIPTION

EMPLOYMENT

List present and past employment beginning with the most recent.

EMPLOYER	POSITION/TITLE(S) HELD	DATE FROM - TO	NAME OF SUPERVISOR(S)
NAME:			
ADDRESS:			
PHONE:			
Reason for Leaving:			
EMPLOYER	POSITION/TITLE(S) HELD	DATE FROM - TO	NAME OF SUPERVISOR(S)
NAME:			
ADDRESS:			
PHONE:			
Reason for Leaving:			
EMPLOYER	POSITION/TITLE(S) HELD	DATE FROM - TO	NAME OF SUPERVISOR(S)
NAME:			
ADDRESS:			
PHONE:			
Reason for Leaving:			
EMPLOYER	POSITION/TITLE(S) HELD	DATE FROM - TO	NAME OF SUPERVISOR(S)
NAME:			
ADDRESS:			
PHONE:			
Reason for Leaving:			

May we contact employers listed above? _____

If not, please indicate which ones you do not wish us to contact:

Additional Information that may be helpful to us: _____

The facts set forth above in my application are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for legal action.

Date: _____

Signature: _____