

EDUCATION

ELEMENTARY AND HIGH SCHOOL Highest grade completed _____ Year of graduation or last year of school _____ Name and location of High School _____					
POST SECONDARY					
NAME AND LOCATION	YEARS ATTENDED FROM TO	YEARS COMPLETED SUCCESSFULLY	MAJOR OR PROGRAM	DID YOU GRADUATE?	DEGREE OR DIPLOMA OBTAINED
UNIVERSITY/COLLEGE					
TRADE OR TECHNICAL					
BUSINESS OR COMMERCIAL					
OTHER TRAINING					

EMPLOYMENT HISTORY

LIST PRESENT OR MOST RECENT EMPLOYER FIRST				
MO.	YR.	EMPLOYER'S NAME AND ADDRESS	POSITION/DUTIES	REASON FOR LEAVING
From:				
To:		Supervisor:		
From:				
To:		Supervisor:		
From:				
To:		Supervisor:		

SKILLS AND QUALIFICATIONS

B.C. Drivers Licence Number: _____ Class _____ Prov./Terr _____
Do you have any restrictions/endorsements on your Drivers Licence? _____ No _____
List any other equipment including heavy equipment that you are qualified to operate _____

List other special skills, interests, abilities or qualification _____

CHARACTER REFERENCES - Exclude relatives

NAME	ADDRESS	TELEPHONE
OCCUPATION		
_____	_____	_____
_____	_____	_____
_____	_____	_____

REMARKS

Additional information or comments: (If more space is required please use a separate sheet of paper).

CERTIFICATION

I certify that the information provided in this application is true and complete to the best of my knowledge. I agree that this information may be verified by the City, and that any intentional misrepresentation of facts shall constitute cause for rejection of this application or, if I am employed by the City on the basis of this application may constitute cause for dismissal.	
Signature of Applicant _____	Date _____

