



# Employment Application Form

Completed application forms must be forwarded to:  
 Department of Human Resources, 30 Honour House Court. Riverview, NB. E1B 3Y9

## PERSONAL INFORMATION

Last Name:	First Name:
Street address:	City & Province:
Postal Code:	Contact number:

## EMPLOYMENT INFORMATION

**Position applied for:**  Regular Full-time  
 Part-time  
 Student

Position Title: \_\_\_\_\_  
 Competition #: \_\_\_\_\_

*If currently or previously employed by the Town, please complete the following:*

Department: \_\_\_\_\_  
 Reason left: \_\_\_\_\_ Date Left: \_\_\_\_\_

*If not currently employed by the Town, please complete the following:*

Have you ever been convicted of a criminal offence for which a pardon has not been granted? Yes No  
 What date are you available to start work? \_\_\_\_\_

In which language(s) do you have proficient working ability? English \_\_\_ French \_\_\_ Other \_\_\_\_\_  
 (specify)

Do you have a valid driver's license? Class \_\_\_\_\_ Endorsement \_\_\_\_\_

## EDUCATION

Name of Institute	Degree/ Diploma	Level Completed	Years attended (from – to)	Location
High school				
Community College				
University				
Other				

Please list other formal training and skills that you have completed and equipment you can operate proficiently.

## EMPLOYMENT HISTORY Begin with most recent.

Employer:	Position:
Location:	Duties:
Employment period:	
Supervisor:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time

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I certify that the information provided in this application is true and accurate. I understand that the withholding of information on this application or on my resume will result in a refusal to hire or in disciplinary action up to and including termination of my employment. I hereby grant permission to any person, firm or corporation to release to the Town of Riverview or its representative any and all information regarding my past work or employment.

**I have read the above prior to signing this application.**  
 Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_