

**EMPLOYMENT APPLICATION FORM**  
*(Please print and complete the entire application form.)*

POSITION APPLIED FOR	
Position: _____	Posting No.: _____

PERSONAL INFORMATION			
Name: _____		Telephone: _____	
Address: _____			
(Street Name/Box Number)	(City/Town)	(Province)	(Postal Code)
Are you <b>legally entitled</b> to work in Canada? <i>(Do you hold a valid Social Insurance Number?)</i> Yes <input type="checkbox"/> No <input type="checkbox"/>			
If you were born in a country other than Canada:			
• do you have a Permanent Resident Card:    Yes <input type="checkbox"/> No <input type="checkbox"/>		<b>or</b>	
• do you have a valid Work Permit:    Yes <input type="checkbox"/> No <input type="checkbox"/>		Expiry Date: _____	

EDUCATION BACKGROUND <i>(attach certificates/diplomas)</i>			
Check Highest Level of High School Completed:    9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>			
Post-Secondary – List: <i>(include institute attended, course completed, year of completion)</i>			
_____			
_____			

ADDITIONAL TRAINING/CERTIFICATION <i>(attach certificates, etc.)</i>			
First Aid: <input type="checkbox"/>	CPR: <input type="checkbox"/>	Valid Fireman's/Boiler's Certificate: <input type="checkbox"/>	Valid Driver's License: <input type="checkbox"/>
School Bus Endorsement: <input type="checkbox"/>	W.H.M.I.S. Certificate: <input type="checkbox"/>	Food Safe/Safe Serve: <input type="checkbox"/>	
Others: <i>(please specify)</i> _____			

WORK EXPERIENCE Please list your last three employers in consecutive order, beginning with your current or last employer.				
	Organization & Address	Position Held	Supervisor	Employed From/To
1.				
2.				
3.				

If you are presently employed, may we contact your current employer?    Yes     No

**REFERENCES - minimum of two supervisors**

	Name	Address	Phone No. (Home)	Phone No. (Work)	Position
1.					
2.					
3.					

Have you previously worked for a School Division in Saskatchewan?      Yes       No

If yes, indicate School Division, dates and position(s): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been discharged from any position?      Yes       No

If yes, explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**AGREEMENT:** *Please read carefully*

I certify that all statements made are true and complete to the best of my knowledge and belief. I understand that any false information may result in either no offer of employment or termination if already hired.

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

**NOTE:** *If submitting a resume as well, please attach it to the Employment Application Form. You may also attach any additional information, which you believe to be relevant to the application.*

Your application and any attachments may be submitted by using any of the options displayed below:

- On-line, as per instructions outlined on our web page.

**OR**

- Scan and email to: [SRSDEmploymentApplication@srsd119.ca](mailto:SRSDEmploymentApplication@srsd119.ca)

**OR**

- Mail to: Human Resources Department – Support Staff/Out-of-Scope Positions  
 Saskatchewan Rivers Public School Division  
 545 – 11<sup>th</sup> Street East  
 Prince Albert, SK S6V 1B1

**OR**

- Drop off at: 545 – 11<sup>th</sup> Street East - Reception  
 Prince Albert, SK

**OR**

- Fax to: (306) 763-4460 Attention: Human Resources Department – Support Staff/Out-of-Scope Positions.

For additional information, contact us at (306) 764-1571 or visit our website at: [www.srsd119.ca](http://www.srsd119.ca) under **SRPSD Careers**.