



MCMUNN & YATES BUILDING SUPPLIES (WINNIPEG)

920 Elmhurst Road • Winnipeg, MB • R3S 1B6
Phone (204) 837-1347 • Fax (204) 831-0822

Personal Information (please print)

| | | | | | |
|--|--|---|--|-------------|----------|
| Last Name | | First Name | | Initial | S. I. N. |
| Street Address | | | | | |
| Town/City | | | Province | Postal Code | |
| Telephone Number | | Have you ever been employed by this company? <input type="checkbox"/> NO <input type="checkbox"/> YES If YES, when? | | | |
| Position your are applying for | | | Desired employment status: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal <input type="checkbox"/> Casual | | |
| Date available to commence employment | | | Age: Are you under 16 years of age? <input type="checkbox"/> YES <input type="checkbox"/> NO | | |
| Are you legally entitled to work in Canada? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | Do you possess a valid motor vehicle operator's license? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, what class of license do you possess? | | |
| Do you have any medical condition(s) which may affect your ability to perform the duties of the job for which you have applied? <input type="checkbox"/> YES <input type="checkbox"/> NO If YES, please specify | | | | | |
| Since a pre-employment medical examination may be necessary for employment with McMunn & Yates Building Supplies, would you be willing to undergo a medical at McMunn & Yates' expense? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | |
| Since being accepted and covered under our company bond policies may be required for employment, would you be willing to authorize the bonding company to conduct a personal investigation? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | |

Education & Training

| EDUCATION | NAME OF SCHOOL | STILL ATTENDING? | GRADE/LEVEL COMPLETED | DEGREE/DIPLOMA OR CERTIFICATE OBTAINED | COURSE TAKEN AND/OR MAJOR SUBJECT |
|---------------------------------|----------------|--|-----------------------|--|-----------------------------------|
| HIGH SCHOOL | | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |
| UNIVERSITY OR COMMUNITY COLLEGE | | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |
| OTHER | | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |

Please indicate any TRAINING AND/OR JOB EXPERIENCE which will assist you in applying for this position (e.g. carpentry, other trades, computer skills)

.....

.....

.....

.....

.....

Employment History

LIST PREVIOUS EMPLOYMENT IN ORDER, BEGINNING WITH YOUR PRESENT OR LAST EMPLOYER

| | | | | |
|---|---|----------|------------------------------------|--|
| 1 | Employer | Position | | |
| | Street Address | | | |
| | Town / City | Province | Postal Code | |
| | Supervisor or Manager | | | |
| | Date Started (mm/yy) | | Date Left (mm/yy) | |
| | Salary: Start \$ per | | Finish \$ per | |
| | Reason for leaving | | | |
| | Briefly outline duties performed | | | |

| | | | | |
|---|---|----------|------------------------------------|--|
| 2 | Employer | Position | | |
| | Street Address | | | |
| | Town / City | Province | Postal Code | |
| | Supervisor or Manager | | | |
| | Date Started (mm/yy) | | Date Left (mm/yy) | |
| | Salary: Start \$ per | | Finish \$ per | |
| | Reason for leaving | | | |
| | Briefly outline duties performed | | | |

| | | | | |
|---|---|----------|------------------------------------|--|
| 3 | Employer | Position | | |
| | Street Address | | | |
| | Town / City | Province | Postal Code | |
| | Supervisor or Manager | | | |
| | Date Started (mm/yy) | | Date Left (mm/yy) | |
| | Salary: Start \$ per | | Finish \$ per | |
| | Reason for leaving | | | |
| | Briefly outline duties performed | | | |

References

Please provide the names of three references (excluding relatives). Include at least one former supervisor whom we might contact about your job performance.

| NAME | TITLE/OCCUPATION | COMPANY | ADDRESS | TELEPHONE NO. |
|------|------------------|---------|---------|---------------|
| | | | | |
| | | | | |
| | | | | |

In connection with my application for employment, I hereby consent that McMunn & Yates Buidling Supplies conduct, and/or cause to be conducted, a personal investigation. I understand that any misleading or incorrect statements render this application void, and, if employed, may be cause for my termination.

SIGNATURE

DATE