



EMPLOYMENT APPLICATION – NON TEACHING STAFF

522 SECOND STREET EAST, FORT FRANCES, ONTARIO P9A 1N4
 TELEPHONE (807) 274-9855 FAX (807) 274-1950 www.rrdsb.com

POSITIONS APPLIED FOR:	FULL TIME <input type="checkbox"/> CASUAL <input type="checkbox"/> PART TIME <input type="checkbox"/> STUDENT <input type="checkbox"/>	FOR OFFICE USE Date Received: _____
DATE AVAILABLE:		

PERSONAL RECORD					
APPLICANT'S NAME					
LAST			GIVEN		
APPLICANT'S ADDRESS:					
NUMBER		STREET		APT. #/UNIT #	
CITY		PROVINCE		POSTAL CODE	
HOME TELEPHONE () -		ALTERNATE TELEPHONE () -		EMAIL ADDRESS	
Are you 18 years of age or older			Are you legally entitled to work in Canada?		
YES <input type="checkbox"/>			YES <input type="checkbox"/>		
NO <input type="checkbox"/>			NO <input type="checkbox"/>		
Have you previously worked for the Rainy River District School Board?			Have you ever been convicted of any offence under the Criminal Code of Canada for which a pardon has not been granted?		
YES <input type="checkbox"/>			YES <input type="checkbox"/>		
NO <input type="checkbox"/>			NO <input type="checkbox"/>		
If hired, do you have reliable means of transportation to get to work?					
YES <input type="checkbox"/>					
NO <input type="checkbox"/>					

EDUCATION	ELEMENTARY SCHOOL		HIGH SCHOOL					COLLEGE/UNIVERSITY (Please specify)				GRADUATE/ PROFESSIONAL	
Last Years Completed (Please circle)	7	8	9	10	11	12	13	1	2	3	4	1	2
Diploma/Degree													
Describe Course of Study													

Describe any specialized training, apprenticeship skills and extra-curricular activities.	
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Describe any honours you have received.	
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WORK HISTORY			
LIST MOST RECENT WORK EXPERIENCE FIRST (ATTACH ADDITIONAL SHEET IF NECESSARY)			
NAME OF EMPLOYER, NATURE OF BUSINESS	FROM MONTH/YEAR	TO MONTH/YEAR	NATURE OF DUTIES AND JOB TITLE
	/		
	to		
	/		
SUPERVISOR'S NAME AND TITLE		TELEPHONE: () -	MAY WE CONTACT? YES <input type="checkbox"/> NO <input type="checkbox"/>
	/		
	to		
	/		
SUPERVISOR'S NAME AND TITLE		TELEPHONE: () -	MAY WE CONTACT? YES <input type="checkbox"/> NO <input type="checkbox"/>
	/		
	to		
	/		
SUPERVISOR'S NAME AND TITLE		TELEPHONE: () -	MAY WE CONTACT? YES <input type="checkbox"/> NO <input type="checkbox"/>
	/		
	to		
	/		
SUPERVISOR'S NAME AND TITLE		TELEPHONE: () -	MAY WE CONTACT? YES <input type="checkbox"/> NO <input type="checkbox"/>

WORK HISTORY:		Secretarial and Clerical Applicants only	
Please specify software programs and provide details of formal training and experience.			
WORDPROCESSING:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
SPREADSHEET:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
DATABASE:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Please provide details of formal training and experience.			
ACCOUNTING BACKGROUND:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
LIST OFFICE MACHINES AND COMPUTER PROGRAMS YOU HAVE USED AND EXTENT TO WHICH YOU CAN OPERATE:			
Maintenance Applicants Only			
DO YOU HAVE A VALID TRADE CERTIFICATE:	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Please specify:			

ADDITIONAL INFORMATION:

Please use this space, if you desire, to summarize any additional information necessary to describe your qualifications more fully, including any volunteer experience.

REFERENCES:

Name	Position	Telephone

This information is being collected pursuant to the provisions of the Municipal Freedom of Information and Protection of Privacy Act and under the authority of the Education Act, c.129, s. 60 and will be used for the purposes of determining suitability, eligibility and qualifications for employment with the Board.

DECLARATION

"I declare all statements on this application to be the best of my knowledge and belief, an accurate statement of facts. I understand and agree that a false statement may disqualify me from employment or result in dismissal. I consent to personal reference checking to be conducted by a representative of the Rainy River District School Board for the purpose of evaluating my application. I understand that if employed by the Board, additional personal information will be requested."

I have read, understand and agreed with the information contained herein.

Signature

Date

Thank you for completing this application form and for your interest in employment with the
Rainy River District School Board.