

EMPLOYMENT APPLICATION

Please Print Full Name: Last First Middle Div/Dept: Are you a former employee of S.A.? _____ Date: Persons legally eligible to work in Canada are: 1. Canadian Citizens 2. Landed Immigrants 3. Holder of valid permit work Expiry Date: ____ Are you legally eligible to work in Canada and prepared to show proof of this eligibility? No ____ TYPE OF WORK DESIRED □ Full Time First Choice Available to Start: □ Part Time Minimum Salary Anticipated: Second Choice Temporary From To Third Choice Available for Shifts? Summer □ Yes □ No From To **EDUCATION RECORD** Date of Attendance Degree, Diploma, or Level Name of Course/s of Institution Study Grade Completed Secondary University College/ Technical Other - course - workshop - seminar

Please list any additional courses, skills, interests, hobbies, special qualifications, or other experiences which you

feel are relevant for the position/s for which you are applying:

EMPLOYMENT HISTORY		
(Please provide information on most recent employment history.)		
Name and Address of Present/Last Employer	Job Title	
	Period of Employment Last Salary:	
	From: To: (optional)	
	Supervisor:	
	Telephone:	
	Reason for Leaving:	
Duties/Responsibilities:		
Name and Address of Previous Employer	Job Title	
	Period of Employment Last Salary:	
	From: To: (optional)	
11	Supervisor:	
	Telephone:	
	Reason for Leaving:	
Duties/Responsibilities:		
Name and Address of Previous Employer	Job Title	
	Period of Employment Last Salary:	
	From: To: (optional)	
	Supervisor:	
1,000	Telephone:	
	Reason for Leaving:	
Duties/Responsibilities:		
For employment references, may we approach:		
Your present employer?	Yes No	
Your former employer?	Yes No	
rour former employer:	Tes — No	
List references, if different from above, on a separate	sheet.	
The facts set forth above in my application for employment are true and complete. I understand and agree that a false statement may disqualify me from employment or result in dismissal.		
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Signature of Applicant PER.001/1.07.92	Date	

Please submit completed application by email to employeerelations@nchope.ca
Completion of an application is not a guarantee of employment.

Applications are only retained for six months and require personal renewal after that period.



STATEMENT OF AUTHORIZATION

Employment Reference Check Only

I Authorize, The Salvation Army, to investigate and verify all statements contained on my Employment Application and/or resume and any other material or information that I have provided. I certify that statements on all application material are true, and understand that misrepresentation or omission of facts called for in the employment application, resume or other application material is cause for termination of employment without notice.

I authorize any current and/or former employer, educational institution, and other individual or entity that has knowledge of me or my records to release information to and communicate freely with The Salvation Army. In consideration of The Salvation Army's review of my application for employment, I hereby release any individual, entity, and The Salvation Army from all claims of liabilities that might arise from the inquiry into or disclosure of such information, including claims under any federal, provincial, or local civil rights law and any claims for defamation or invasion of privacy.

Signature and Print (Applicant)
 Witness (Interviewer)
 Date (day/month/year)



Mission Statement

The Salvation Army exists to share the love of Jesus Christ, meet human needs and be a transforming influence in the communities of our world.

Core Values

Hope: We give hope through the power of the gospel of Jesus Christ.

Service: We reach out to support others without discrimination.

Dignity: We respect and value each other, recognizing everyone's worth.

Stewardship: We responsibly manage the resources entrusted to us.

Territorial Vision Statement

We are an innovative partner, mobilized to share hope wherever there is hardship, building communities that are just and know the love of Jesus.