



**Edmonton**  
 15305-128 Avenue  
 Edmonton, AB T5V 1A5  
 Phone: (780) 447-4242  
 Fax: (780) 453-6622

**Calgary**  
 7220-44<sup>th</sup> Street SE  
 Calgary, AB T2C 3A7  
 Phone: (403) 720-3244  
 Fax: (403) 279-4062

|   |   |   |                              |                 |
|---|---|---|------------------------------|-----------------|
| Name  |   | Date  |                              |                 |
| Address   |   | Telephone   |                              |                 |
| Position Desired  |   | Social Insurance Number   |                              |                 |
| Drivers License #   | # Of Demerits                                 | Class   | Yrs Driving                  | Abstract Attc'd |
| Driver Training Courses and Certification achieved  |   |   |                              |                 |
| Do you have your own transportation   |   | Other Training (safety, first aid)  |                              |                 |
| Are you legally entitled to work in Canada  |   | Can you legally enter the United States   |                              |                 |
| Availability: Summer<br>Days <input type="checkbox"/> Nights <input type="checkbox"/> weekends <input type="checkbox"/> |   | Availability: Winter<br>Days <input type="checkbox"/> Nights <input type="checkbox"/> weekends <input type="checkbox"/> |                              |                 |
| Education (grade completed)   |   | Post Secondary Education  |                              |                 |
| <b>PREVIOUS WORK EXPERIENCE (begin with most recent employment)</b>   |   |   |                              |                 |
| Employer Name   |   | Position  |                              | Salary          |
| Address   |   |   | Name of immediate supervisor |                 |
| Date (from)<br>____/____/____<br>mm / dd / yyyy   | Date (to)<br>____/____/____<br>mm / dd / yyyy |   | May we contact this employer |                 |
| Reason for leaving  |   |   |                              |                 |
| Employer Name   |   | Position  |                              | Salary          |
| Address   |   |   | Name of immediate supervisor |                 |
| Date (from)<br>____/____/____<br>mm / dd / yyyy   | Date (to)<br>____/____/____<br>mm / dd / yyyy |   | May we contact this employer |                 |
| Reason for leaving  |   |   |                              |                 |
| Employer Name   |   | Position  |                              | Salary          |
| Address   |   |   | Name of immediate supervisor |                 |
| Date (from)<br>____/____/____<br>mm / dd / yyyy   | Date (to)<br>____/____/____<br>mm / dd / yyyy |   | May we contact this employer |                 |
| Reason for leaving  |   |   |                              |                 |