



Little

# SHORT STOP

## APPLICATION FOR EMPLOYMENT

Complete in Ink - Please Print - Answer All Questions Completely

### PERSONAL DATA

LAST NAME FIRST NAME MIDDLE INITIAL (AREA CODE)TELEPHONE #

STREET ADDRESS APT.# CITY POSTAL CODE

How long have you resided at the address above? \_\_\_\_\_ Are you over the age of 15? YES\_\_\_ NO\_\_\_

PREVIOUS ADDRESS \_\_\_\_\_ How Long? \_\_\_\_\_

STREET ADDRESS APT.# CITY PROVINCE

Please indicate how you would like to be addressed in any correspondence: MR.\_\_\_ MRS.\_\_\_ MISS\_\_\_ MS.\_\_\_

Are you legally entitled to work in Canada? YES\_\_\_ NO\_\_\_

Do you have any relatives or friends employed with Little Short Stop? YES\_\_\_ NO\_\_\_

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ WHERE? \_\_\_\_\_

Have you ever been convicted of a criminal offence for which a pardon HAS NOT been granted? YES\_\_\_ NO\_\_\_

If yes, describe in full: \_\_\_\_\_

### AVAILABILITY

Do you intend to work FULL-TIME?\_\_\_ PART-TIME?\_\_\_

Are you a student? YES\_\_\_ NO\_\_\_

Indicate the times that you are available for work: (starting & finishing times)

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
TO	TO	TO	TO	TO	TO	TO

WEEKDAYS YES\_\_\_ NO\_\_\_ EVENINGS YES\_\_\_ NO\_\_\_

WEEKENDS YES\_\_\_ NO\_\_\_ NIGHT SHIFT YES\_\_\_ NO\_\_\_

Are you available to work a variety of shifts on a regular basis? YES\_\_\_ NO\_\_\_

EXPLAIN: \_\_\_\_\_

Are you willing to work at a location other than the store you are applying at? YES\_\_\_ NO\_\_\_

If hired, on what date will you be able to start work? \_\_\_\_\_

### EXPERIENCE

Do you have any experiences, skills or qualifications that would especially fit you to work for Little Short Stop? \_\_\_\_\_

Why do you want to work for Little Short Stop? \_\_\_\_\_

What does a customer mean to you? \_\_\_\_\_

List any activities, sports or hobbies: \_\_\_\_\_

How did you learn of this opening? \_\_\_\_\_

## EDUCATION

Are you currently attending an institution of learning? YES\_\_\_ NO\_\_\_

Name of School: \_\_\_\_\_ Grade Level: \_\_\_\_\_

	NAME AND LOCATION	YEAR LEFT OR GRADUATED	TYPE OF CERTIFICATE, DIPLOMA OR DEGREE
SECONDARY SCHOOL			
POST SECONDARY			

Do you plan any further education? YES\_\_\_ NO\_\_\_

If yes, please describe: \_\_\_\_\_

## EMPLOYMENT

	PRESENT / LAST EMPLOYER	PREVIOUS EMPLOYER	PREVIOUS EMPLOYER
NAME OF EMPLOYER			
ADDRESS			
CITY AND PROVINCE			
TYPE OF BUSINESS			
JOB TITLE			
PERIOD OF EMPLOYMENT FROM/TO	TO	TO	TO
NAME OF SUPERVISOR			
TELEPHONE NUMBER			
SALARY			
REASON FOR LEAVING			
DUTIES AND RESPONSIBILITIES			

Thank you for your interest in pursuing a job opportunity with Little Short Stop. Feel free to attach a resume to your application, however, we still require that all details of the application form be completed. If you are not contacted within two weeks you may assume that there are no present openings or the openings have been filled. We will retain your application for future considerations.

## CONSENT

I authorize you to obtain such factual investigative job related information regarding me as permitted by law and I agree to provide such additional information concerning my employment experience. I hereby declare that the foregoing information is true and complete to my knowledge. I understand that a false statement may disqualify me from employment, or cause my dismissal.

SIGNATURE

DATE

MANAGER'S SIGNATURE

STORE APPLIED AT