



World Class Learning in a Rural Environment

School District 10 (Arrow Lakes)

General Application for Employment

PO Box 340, Nakusp, BC V0G 1R0

Tel: (250) 265-3638

Fax: (250) 265-3701

PERSONAL DATA

Please answer all questions carefully in ink, in your own handwriting.

Date of Application (dd/mm/yyyy):

Print names and addresses

____ / ____ / ____

Last Name: _____

First Name: _____

Complete Mailing Address: _____

Have you ever been employed by School District 10?

☐ Yes / ☐ No

Are you legally permitted to work in Canada?

☐ Yes / ☐ No

Type of work desired:

☐ Full Time / ☐ Part Time

☐ Permanent / ☐ Casual

☐ Teacher

☐ Education Assistant

☐ Tradesperson

☐ Bus Driver

☐ Noon-Hour Supervisor

☐ Teacher on Call

☐ School Secretary

_____ (specify trade(s))

☐ Custodian

EDUCATION & TRAINING

Please submit copies of relevant certificates

Level	School, University or Institution	Dates Attended To - From	Program Type Certificate/Diploma/Degree	Field of Study Major/Minor
Secondary				
College/ University				
College/ University				
Technical Training				
Technical Training				
Post Grad				

EMPLOYMENT HISTORY

Most recent job first. Include summer and part-time work. Indicate if employed under another name.

Dates: **From:** _____ **To:** _____
Employer: _____ **Address:** _____
Supervisor: _____
Position/Duties: _____

Reference: _____ **Phone Contact:** _____

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Employer: _____ **Address:** _____
Supervisor: _____
Position/Duties: _____

Reference: _____ **Phone Contact:** _____

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Employer: _____ **Address:** _____
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Dates: **From:** _____ **To:** _____
Employer: _____ **Address:** _____
Supervisor: _____
Position/Duties: _____

Reference: _____ **Phone Contact:** _____

QUESTIONS

1. Do you have any outstanding criminal charges or have you ever been convicted of a criminal offence? (NOTE: A charge or conviction will not automatically exclude you from employment opportunities. The requirements of the position applied for and the circumstances related to the charge or conviction will be considered.) ☐ Yes / ☐ No
2. Have you ever been dismissed, suspended, or disqualified of any profession, association, force or other organization? ☐ Yes / ☐ No
3. Have you ever had an accident related to your employment? ☐ Yes / ☐ No
4. Do you know of any reason why you should not be employed in a capacity in which you work with or will be in contact with children? ☐ Yes / ☐ No
5. Do you have any health-related limitations which could affect the manner in which you perform the occupational requirements of the work for which you are applying? ☐ Yes / ☐ No
6. Are you at this time, suffering from any communicable disease? ☐ Yes / ☐ No
7. If offered a position are you willing to be tested for any communicable disease? ☐ Yes / ☐ No
8. How many days of work have you missed through illness in the past year? _____

What was the nature of the illness? _____

NOTES:

- a) If you answered 'Yes' to questions 1, 2, 4, 5, or 6, please provide details on a separate sheet and place in a sealed enveloped marked 'confidential' and attach it to the application form.
 - i. A 'Yes' response to question 1 requires particulars related to the outstanding charges or conviction and the sentence imposed. Include a minimum of one authority (name, position, contact details inducing phone) with whom we may discuss matters and confirm details.
- b) These questions are required to determine the applicant's suitability for bona fide occupational requirements.
- c) All applicants not currently employed with SD10 are advised that prior to confirmation of employment, the prospective employee must successfully complete a criminal record check.

REFERENCES

List two (2) work related references with contact information. References should not related to you.

(1) Name of Reference: _____

Position: _____

Phone No.: _____

Phone No.: _____

(2) Name of Reference: _____

Position: _____

Phone No.: _____

Phone No.: _____

AUTHORIZATION

I authorize School District 10 (Arrow Lakes) to contact previous/present employees for reference information:

Applicant Signature

I hereby certify that all information provided in this application and any attachments is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment, or, if I am hired, may result in my dismissal from employment if discovered at a later date.

Applicant Signature

Date