



Application Form

Instructions - Application for Employment

Demographics

- List your full name, including your middle name, no abbreviations please
- List your current address and phone number, if any
- If you receive a conditional offer of employment, you will be required to provide any previous or alternate names or aliases, as well as at least seven years of address history, including exact street address, city, province/state, postal code and apartment number, if any, and to identify how long you resided at each address. Please do not provide such information unless you are given a conditional offer of employment

Educational Background

- Please list your educational/academic experience
- You are not required to provide the names, addresses, or locations of any institution attended during the application stage
- If you receive a conditional offer of employment, you will be required to provide a certified copy of any certificate of completion or other document evidencing your qualifications to the company as a condition of employment. Please do not provide such information unless you are given a conditional offer of employment

Employment History

- This section must be completed in full. Please do not mark “see resume”
- Please be sure to include the dates of employment for each employer, correct addresses and phone numbers as well as your position title and/or responsibilities
- “Reasons for Leaving” do not include reasons related to maternity/parental leave or illness

References

- This section must be completed in full. Please do not mark “see resume”
- This section is for you to list individuals who can give a professional opinion on your ability and experience, not a personal reference

Remember your Signature

- Please remember to sign the ‘Consent Acknowledgement and Applicant’s Signature’ Form

Application for Employment

All employment decisions are made without regard to race, religion, colour, gender, physical disability, mental disability, ancestry, age, place of origin, marital status, source of income, family status, sexual orientation, or any other legally recognized status entitled to protection under applicable human rights legislation.

Instructions

Please **answer all questions**, where applicable, completely and truthfully to the best of your knowledge and belief. Type or print in ink as carefully as possible. While not necessary or required, you may submit additional information by way of letter, resume or the like to supplement your answers. Resumes do not replace the requirement for a complete Application. Applications not fully completed will not be considered for employment.

Date	Position Applying For		
Last Name	First	Middle	
Present Address:		Telephone-Daytime: ()	
City	Province/State	Postal Code	Home Phone: ()
E-Mail Address: PRINT CLEARLY			
Geographic restriction?			
Compensation Expectation?			
Have you signed a document with your current and/or former employer(s) restricting your ability to work with or be employed by a competitor?			
<input type="checkbox"/> Yes (If yes, please provide a copy)			
<input type="checkbox"/> No			
Can you, after conditional hire, furnish proof that you are eligible to work in Canada/United States?			
<input type="checkbox"/> Yes			
<input type="checkbox"/> No			
Have you ever been convicted of a crime for which a pardon has not been granted?			
<input type="checkbox"/> Yes			
<input type="checkbox"/> No			
If yes, what was (were) the crime(s)?			
Date(s) and place(s) of conviction			
Note: Conviction will not necessarily disqualify you from employment.			
Type of Employment Sought:		Do you have a shift restriction?	
<input type="checkbox"/> Full-time Regular		<input type="checkbox"/> No	
<input type="checkbox"/> Part-time Regular		<input type="checkbox"/> Yes, Please Specify	
<input type="checkbox"/> Other (Please Specify)		Do you have an overtime restriction?	
		<input type="checkbox"/> No	
		<input type="checkbox"/> Yes, Please Specify	

Educational Background

Course of Study	Years Completed	List degrees Certified copies of any certificates held must be provided upon receipt of a conditional offer of employment.	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Professional, Community or Extracurricular Activities

List any participation in professional, community or extracurricular activities or organizations that you feel further indicate your qualifications for the position for which you are applying. You may exclude organization names, which indicate race, colour, ancestry, place of origin, religious beliefs, gender, age, physical disability, mental disability, marital status, family status, source of income and sexual orientation, or any other legally recognized status entitled to protection under applicable human rights legislation.

Employment History

List all your employment, beginning with your present or most recent employment. Include military service assignments, if applicable. Complete beginning and ending dates for all previous employment are required.

Under "Reasons for Leaving" you are not required to provide information related to resignations related to leaves of absence for maternity/parental leave, or as a result of illness.

From and To:	Employer Name & Address	Position Title and Responsibilities	Current/Last Salary/Annual
Supervisor Name, Address and Telephone			Reason for Leaving

May we contact this employer as a reference? Yes No

From and To:	Employer Name & Address	Position Title and Responsibilities	Current/Last Salary/Annual
Supervisor Name, Address and Telephone			Reason for Leaving

May we contact this employer as a reference? Yes No

From and To:	Employer Name & Address	Position Title and Responsibilities	Current/Last Salary/Annual
Supervisor Name, Address and Telephone			Reason for Leaving

May we contact this employer as a reference? Yes No

References (Individuals Qualified To Give an Opinion of Your Professional Ability and Experience)

Name/Relationship (do not include relatives)	Employer	Position	Address and Telephone

General Conditions

PLEASE READ THIS STATEMENT CAREFULLY, AND PLACE YOUR SIGNATURE AND THE DATE BELOW, AFTER YOU COMPLETE THIS APPLICATION:

Consent Acknowledgement

I understand that the Company is collecting my personal information on this form to determine my suitability for the position I have applied for and, if the Company hires me, for the purposes of my employment relationship with the Company. I understand that the Company will use and disclose my personal information only for those purposes or as permitted or required by law. I consent to the Company collecting, using and disclosing my personal information on this form for these purposes. I also consent to the Company obtaining my personal information from any references I have specified in this application and to the Company using that information for the purposes described above. I acknowledge that I have been provided the opportunity to ask questions regarding this application form and consent.

I understand this application is not an employment contract, does not create such contract, nor is it a guarantee of employment. I acknowledge that the Company has not made any promises or representations that differ from those contained in this paragraph.

I understand that if I am made a conditional offer of employment such offer will be conditional on my then agreeing to the Background and Reference Check described on the next page. If I refuse to sign the Release for Background and Reference Check once presented with the conditional offer of employment with Flying Squirrel Sports, then such offer will automatically be withdrawn.

I understand that if I am made a conditional offer of employment I must then provide satisfactory documents to establish my identity and right to work in Canada/United States and that failure to provide this evidence will result in: (i) any offer of employment becoming null and void; or (ii) if I have already commenced such employment, the termination of my employment for cause. I also understand that any false statements or material omissions of fact made by me in this application form or the interview process may disqualify me from employment, or if I am hired, result in my termination for cause.

I further understand that in the event I am hired by the Company, I will be required to do the following as a condition of employment, which I hereby acknowledge and agree to do when requested:

- i. I will be required to sign an agreement that will contain, among other things, provisions that will: (a) require me to keep all private and proprietary information of the Company confidential and not use it for any unauthorized purpose; (b) automatically assign any and all "Intellectual Property" that results from my performance of services for the Company to the Company;
- ii. I will be required to abide by Company policies and procedures which will be distributed to me during a New Employee Orientation (which I will be required to attend) and which will also be distributed to me from time to time as such policies are added or revised; and
- iii. I may be required to provide physical evidence which verifies any degrees or certificates I claim I received from any institutions that provided me with education and/or special training.

I understand that failure to fulfill any of the conditions of employment above may result in: (i) any offer of employment becoming null and void; or (ii) if I have already commenced such employment, the termination of my employment for cause. I also understand that any false statements or material omissions of fact made by me in this application form or the interview process may disqualify me from employment, or if I am hired, result in my termination for just cause.

I release and agree to release and hold harmless: (i) any individual, company, business institution or government agency from all liability with regard to the disclosure of my personal information to the Company; and (ii) the Company from all liability with respect to the collection and use of such personal information, provided that the collection, use or disclosure is in accordance with applicable law.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with the Company may be terminated for cause.

Applicant's Signature

Date

Applicant's Name Printed

FOR EMPLOYMENT OFFICE USE ONLY

Classification: _____ Rate: _____ Section: _____ Effective: _____

Applicant Release for a Background and Reference Check

I acknowledge that the nature of the services that I am expected to provide to the clients of Flying Squirrel Sports (the "Company") requires that the Company conduct a background and criminal records check on me. I agree that such background checks and criminal records check are reasonable in the circumstances and are bona fide requirements for the employment that has been conditionally offered to me by the Company. I understand that for the purpose of such background and criminal records checks, inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, provincial, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies.

I authorize without reservation, the Company and any party or agency contacted by the Company to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from the Company and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

Applicant's Signature

Date

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose:

Please Print Clearly:

Print Full Name: _____ Sex: Male _____ Female _____

Print other names you have used: _____ Dates used: _____

Home Addresses (for the last 4 years, list most current first -- use back for more space): Street:

City: _____ Province/State: _____

Postal Code: _____ Country: _____

From - To Dates: _____ - _____

Street: _____ City: _____ Province/State: _____

Postal Code: _____ Country: _____

From - To Dates: _____ - _____

Street: _____ City: _____ Province/State: _____

Postal Code: _____ Country: _____

From - To Dates: _____ - _____

Street: _____ City: _____ Province/State: _____

Postal Code: _____ Country: _____

From - To Dates: _____ - _____