

P.O. Box 166
Tusket, Nova Scotia
B0W 3M0



Phone (902) 648-3307
Fax (902) 648-0167
Email garian@eastlink.ca
www.garianconstruction.ca

Application for Employment

Date: _____

Personal

Name:

Last	First	Middle
------	-------	--------

Mailing Address:

No.	Street	City	Prov.	Postal Code
-----	--------	------	-------	-------------

Place of Residence: _____

City / Town	Province
-------------	----------

Telephone Number: _____ Email Address _____

Job Applied For: _____ Pay Rate Expected: _____

List Trade Licenses or Certificates

_____ Issuing Province _____

Memberships in association or organization, or other memberships

List Current Completed Safety Courses

P.O. Box 166
Tusket, Nova Scotia
B0W 3M0



Phone (902) 648-3307
Fax (902) 648-0167
Email garian@eastlink.ca
www.garianconstruction.ca

If required, do you have: (Y/N)

Automobile _____ Tools _____ Safety Equipment _____

Drivers License _____ Master # _____

If hired, on what date will you be available to start work? _____

Have you any physical limitations, which might interfere with or limit your performance in the job(s) you are applying for?

Yes ____ No ____ if yes, please specify _____

Are you willing to work in the Tri-County areas? Yes ____ No

Educational Background

Name & Address _____ Highest level and year completed.

High School

College

Post Graduate

Business or Trade

Other

P.O. Box 166
Tusket, Nova Scotia
B0W 3M0



Phone (902) 648-3307
Fax (902) 648-0167
Email garian@eastlink.ca
www.garianconstruction.ca

Work History

Name of Present or Last Employer _____ From / To _____ Period _____
Address _____ Phone Number _____

Job Title and Description of Work & Responsibilities

Name of Previous Employer _____ From / To _____ Period _____
Address _____ Phone Number _____

Job Title and Description of Work & Responsibilities

Name of Previous Employer _____ From / To _____ Period _____
Address _____ Phone Number _____

Job Title and Description of Work & Responsibilities

P.O. Box 166
Tusket, Nova Scotia
B0W 3M0



Phone (902) 648-3307
Fax (902) 648-0167
Email garian@eastlink.ca
www.garianconstruction.ca

Personal References

Name at least three persons who can supply information pertinent to your performance (excluding former employers or relatives).

Name and Occupation	Address	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal.

Signature of Applicant _____