

CHIGNECTO-CENTRAL REGIONAL SCHOOL BOARD



PLEASE PRINT

**Employment Application Form
(Maintenance, Custodial, or Transportation)**

Position Applying For: _____ Competition # _____

[NOTE: A SEPARATE APPLICATION FORM MUST BE COMPLETED/COPIED FOR EACH COMPETITION]

PERSONAL INFORMATION

Name _____
 (First) (Middle) (Last)

Current Address: _____
 (Street Address or Civic Number & Road) (Town) (Postal Code)

Telephone Number: _____ Cell Number: _____

EDUCATION

Highest Grade Level Completed: _____ Year _____

Other courses/training (name of program, location, and year) _____

EMPLOYMENT HISTORY

Present Employer _____
 Duties of Employment: _____

 Start and End Date with this employer _____
 Reason for leaving _____

Previous Employer _____
 Duties of Employment: _____

 Start and End Date with this employer _____
 Reason for leaving _____

Previous Employer _____
 Duties of Employment: _____

 Start and End Date with this employer _____
 Reason for leaving _____

SKILLS, ABILITIES, QUALIFICATIONS

List any specific skills, abilities or qualifications which would be particularly useful in the job for which you are applying.

An additional separate personal resumé is required, along with trades certificates and driver abstracts, if making application for tradesperson/general maintenance positions.

DRIVERS LICENSE

Do you hold a valid N.S. Driver's License? Yes ___ No ___

NOTE: If applying for a job as a Bus Driver, please attach a Driver Abstract (available from Department of Transportation) and a photocopy of your Drivers License. Where needed, a Driver Training program can be provided by the Board.

REFERENCES

Name	Address	Occupation	Telephone

VOLUNTARY SELF-IDENTIFICATION

The following information is on a voluntary basis. Please check the spaces that apply to you.

- * Sex: Male ___ Female ___
- * Member of Aboriginal Peoples of Canada: Inuit ___ Metis ___ Non-status Indian ___ Status Indian ___
- * Member of Visible Minority Group: Are you, by virtue of your race or colour, in a Visible Minority in Canada?
 Yes ___ No ___ If Yes, please specify: _____
- * Persons with Disabilities: For the purposes of employment, do you consider yourself, or do you believe that a potential employer would likely consider you disadvantaged by reason of a persistent disability? Yes ___ No ___
- * If Yes, please specify _____

NOTE: Applications are not kept on file. A separate application must be submitted for each new position advertised.

I certify that the foregoing statements are complete and correct to the best of my knowledge and belief.

Signature _____ Date _____

*Any person gaining employment with the Chignecto-Central Regional School Board must agree to complete an application for the **Child Abuse Registry Request for a Search and Police Records Check.**

Completed application forms are to forwarded to:
**Human Resources Department
 Chignecto-Central Regional School Board
 60 Lorne Street, Truro, N. S. B2N 3K3**

(Faxes are not accepted)