





Calgary Head Office 824-41st Avenue N.E., Calgary, AB, T2E 3R3 Phone (403) 717-1400, Fax (403) 717-1491

Monday

PLACEMENT INFORMATION

Position Applied For

Date Available (YY-MM-DD)

Please specify Availability:

From (hours) eg. 1:00pm Toronto Distribution Centre 636 Marcove Rd. ON, L5T 2R7 Phone (905) 795-4700, Fax (905) 795-4709 Laval Office 4855 Louis B. Mayer, Laval, QB, H7P 6C8 Phone (450) 687-5200, Fax (450) 687-1079

PART-TIME

Saturday

WEEKENDS

SEASONAL

ANY

Sunday

FULL-TIME

Friday

PM

EVENINGS

EMPLOYMENT APPLICATION

When are you able to work?

Thursday

Wednesday

Tuesday

To 9:00pm										
•										
		,								
PERSONALDATA			_							
Last Name				Given Name(s)						
Address							Postal Code			
City Province			Province	Business Telephone						
Home Telephone					Are you authorized to work in Canada? YES NO					
Have you previously been employment and store/loca	employed by The Forzani Group Lt	d.? If yes, state	e dates of	1	May w	ve contact your prese	nt employer?	YES		NO
Are you presently employed? YES NO				What source referred you to this company?						
Do you have any friends of The Forzani Group Ltd.?	or relatives working at	i e	NO							
DUCATION			_							
Name of Program	Institution Name		— Cour	se of Study		Length of Grade/Yea	Program and irs Completed	Dij	ploma/ Awar	Degree ded
	Institution Name		— Cour	se of Study		Length of Grade/Yea	Program and irs Completed	Di _l	Awar	Degree ded
Name of Program	Institution Name		– Cour	se of Study		Length of Grade/Yea	Program and urs Completed		Awar S	ded
Name of Program Secondary	Institution Name		C our	se of Study		Length of Grade/Yea	Program and irs Completed	YES	Awar S	NO
Name of Program Secondary College	Institution Name		Coun	se of Study		Length of Grade/Yea	Program and irs Completed	YES	Awar	NO NO
Name of Program Secondary College University Other	Institution Name	ng applied for		se of Study		Length of Grade/Yea	Program and irs Completed	YES	Awar	NO NO NO
Name of Program Secondary College University Other		ing applied for		se of Study		Length of Grade/Yea	Program and irs Completed	YES	Awar	NO NO NO
Name of Program Secondary College University Other Qualification, skills and tra			r:		ns of (Grade/Yea	rs Completed	YES YES YES	Awar	NO NO NO

EMPLOYMENT RECORD

	Please begin with your most recent employmen	t.You may attach a re	sume or additional	information.						
I	Employer	Address				Telephone				
	Co. et a P. et									
	Starting Position		Last Position			Salary				
	Dates Employed From	То			Reason for Leaving	ı				
	Duties/Responsibilities									
2	Employer	Address				Telephone				
	Starting Position	tarting Position		l		Salary				
	Dates Employed From	То		Reason for L						
	Duties/Responsibilities	s/Responsibilities								
3	Employer			Address			Telephone			
,	Employer	loyer		Address			Тегерпопе			
	Starting Position		Last Position		Salary					
	Dates Employed From	То			Reason for Leaving					
	Duties/Responsibilities	Duties/Responsibilities								
4	imployer tarting Position		Address				Telephone			
			Last Position			Salary				
	Dates Employed From	То			Reason for Leaving					
	Duties/Responsibilities	uties/Responsibilities								
	REFERENCES									
	pervisors of previous positions including volunteer activities. Do not include relatives.									
	Name P		Position		Company		Telephone			
	CERTIFICATION AND SIGNAT									
	Before signing, be sure your application is filled out completely and that you have read and understood the following declaration:									
	I declare my answers to the questions on this application are true and give this company the right to investigate all references and information given. I agree that any false statement or misrepresentation on this application may be cause for refusal to hire or for immediate dismissal.									
	If offered employment, I understand that there will be a specific probationary period according to Company policy. My employment status will be probationary until the successful completion of this period. I understand that I may be required to supply a background criminal record check for some positions.									
	If requested by the management at any time, I agree to submit to a search of my personal bags, containers and of any locker that may be assigned to me, and hereby waive all claims for damages on account of such examination.									
	The Forzani Group Ltd. is an equal opportunity employer and always selects the best qualified individual for the job based upon related qualifications, regardless of race, color, sexual orientation, ethnic origin, creed, sex, handicap, or other prohibited grounds of discrimination under provincial, federal, or local Human Rights laws.									
	Signature					Date				