

## FRESHWATER FISH MARKETING CORPORATION

1199 Plessis Road, Winnipeg, MB R2C 3L4

## **EMPLOYMENT APPLICATION**

All applications will be held for a maximum period of 3 months

# TYPE OF POSITION APPLIED FOR:

Date Available:

### PERSONAL INFORMATION

LAST NAME:									
FIRST NAME:	MIDDLE NAME(S):								
Street Address:									
City/Town:		Province:	Postal Code:						
Home phone:		Cell phone:							
Email address:		Bus. Phone:	Messages:						
Are you entitled to work i permit? No □ Yes □	-	nadian citizenship, landed ii olies to you.	mmigrant status or work						
Are you over the age of 17 years? No □ Yes □									
What location(s) would you be interested in working at:  Winnipeg  Selkirk  Riverton									
Has Freshwater Fish Marketing ever employed you? No D Yes D If yes, state period of employment: From to Position held:									
Have you received prior t	raining in power jack and fo	orklift operation? No D Yes	s 🗆						
Do you have any allergies to seafood, fish or seafood or fish products? No $\Box$ Yes $\Box$									
	EDUC	ATION							
Type of School	Highest Grade or Year Completed	Name of School and Course of Study or Major	Date Attended (dd/mm/yy)						
High school or equivalent	9 10 11 12 13								
College or university	1 2 3 4								
Vocational or trade school									
Graduate school									
Other									
List any other certifications o	r licenses you currently posses	s:							

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EMPLOYMENT HISTORY (List present or most recent position first) If your duties or responsibilities changed substantially with the same employer, record each change as a separate position. (Please attach résumé if available.)							
Present/Last Employer:							
Employer Address:							
Period of Employment: From:	To:						
Occupation:		Rate of Pay:					
Immediate Supervisor's Name:	Title:	Phone:					
May be contacted for a reference:  Yes	No Reason for leaving:						
Describe duties/responsibilities and significant ach	nievements:						
Next to Last Employer:							
Employer Address:	<del>_</del>						
Period of Employment: From:	To:						
Occupation:		Rate of Pay:					
Immediate Supervisor's Name:	Title:	Phone:					
Reason for leaving:							
Describe duties/responsibilities and significant ach	nievements:						
Previous Employer:							
Employer Address:							
Period of Employment: From:	To:						
Occupation:	10.	Rate of Pay:					
Immediate Supervisor's Name:	Title:	Phone:					
Reason for leaving:							
Describe duties/responsibilities and significant ach	nievements:						
Please provide any additional information which will assist in considering your application for employment							
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WORK RELATED REFERENCES														
Name			Position Title		Company				Phone					
LANGUAGES (Please specify language information as requested)														
English 🛛	Speak		Read		Write		Frenc	h		Speak		Read		Write 🛛
Other (Please List)					Speak		Read		Write D					

#### AUTHORIZATION

Please read carefully before authorizing. This application is not valid unless your name as authorization is signed or written in the signature space provided below.

(Note: If this application is submitted electronically, it is not valid unless your name is keyed in the signature space provided below).

Your authorization on this application form is your consent that as a condition of being considered for employment at Freshwater Fish Marketing Corporation, references about past work performance that have been provided and authorized on this form will be contacted at the information provided.

I certify that the information provided in this application or attachments, or resume is true and complete. I understand that if any information in this application or its attachments or resume is found to be untrue or incomplete, my application may be rejected, or I may be terminated for just cause if I am the successful applicant.

**Applicant Signature** 

Date of Application

Only those applicants who are considered for employment will be contacted.