



MAINTENANCE & CONSTRUCTION SKILLED TRADES COUNCIL

95 Shorting Road, Mezzanine Level
Toronto, Ontario M1S 5B9
Tel: (416) 406-0115 Fax (416) 406-3410

**JOB APPLICATION FORM
SUMMER STUDENTS – 2019**

Due: January 25, 2019

TYPE OF EMPLOYMENT REQUESTED (Please rank Preference in Numerical Order)

Unit E – Maintenance and Construction Skilled Trades:

*Grounds

*required to start April 29, 2019

**IN WHICH AREA OF TORONTO WOULD YOU LIKE TO WORK?
(Please rank Preference in Numerical Order)**

- West Area A LC1 (McCulloch) West Area B LC4 (Eastern)
- East Area C LC3 (McGriskin) East Area D LC2 (McGriskin)

When are you available to start work? _____
(dd/mm/yyyy)

At which times of the day are you available to work? _____

AGE (Must be at least 16 for summer employment)

- 16 – 18 18 – 21 >21

PERSONAL INFORMATION (Please Print)

| | | |
|---|-------------------|----------------------|
| | | |
| Last Name | Given Names | Preferred Name |
| | | |
| Address/Apt Number | City | Province/Postal Code |
| | | |
| Permanent Home Phone # | Alternate Phone # | Email Address |
| | | |
| Do you have a valid Driver’s License? <input type="checkbox"/> Yes <input type="checkbox"/> No Class _____ | | |
| Current School or other Full Time Educational Program: | | |
| | | |
| Name of School Board (if applicable): _____ | | |
| Current Year of Study (Circle): 1 2 3 4 5 | | |
| Are you/will you be registered as a full time student for next September? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| It is expected that students will report to work for the entire assigned period. Any extenuating circumstance for required absence will need to be submitted for approval prior to acceptance of a potential job offer. | | |

EMERGENCY CONTACT

Name: _____ Relationship: _____ Phone No.: _____

MOST RECENT EMPLOYMENT EXPERIENCE

1. _____
Name of Employer _____ **Employed From/To** _____

Position Held _____

Primary Duties and Responsibilities _____

2. _____
Name of Employer _____ **Employed From/To** _____

Position Held _____

Primary Duties and Responsibilities _____

REFERENCES (Work-Related)

1. _____
Name and Phone Number

2. _____
Name and Phone Number

3. _____
Name and Phone Number

DECLARATIONS

Are you legally eligible to work in Canada? Yes No

Social Insurance Number and Date of Birth will be required at the time of an offer of employment. Upon confirmation of the offer of employment, it is the policy of the Board that each employee of the Board has a police record check completed.

In accordance with Section 29(2) of the Municipal Freedom of Information and Protection of Privacy Act, this is to advise that the information you provide on this form is collected under the legal authority of the Education Act, and will be used as necessary for the recruitment, selection and employment purposes of the Board.

I HEREBY DECLARE THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND TO THE BEST OF MY KNOWLEDGE COMPLETE. I UNDERSTAND THAT A FALSE STATEMENT MAY DISQUALIFY ME FROM MY EMPLOYMENT OR RESULT IN MY IMMEDIATE DISMISSAL FOR CAUSE. I WILL BE REQUIRED AT THE TIME OF AN OFFER OF EMPLOYMENT TO PROVIDE MY SOCIAL INSURANCE NUMBER AND DATE OF BIRTH.

Date

Signature

We are an equal opportunity employer and adhere to fair employment practices. You will be contacted only if you are selected for an interview. We strive to meet the accommodation needs of persons with disabilities. Applicants are encouraged to make their needs for accommodation known in advance during the application process.