



Box 2110
#200 - Route 100
Morden, MB R6M 1B8
Phone: (204)822-6151
Fax: (204)822-6856

APPLICATION FOR EMPLOYMENT

PLEASE PRINT PLAINLY

Date: \_\_\_\_\_

Name: \_\_\_\_\_

How did you hear about Decor Cabinets?

- Radio Job Bank (Employment Ins.) Pembina Valley Online
Newspaper Signage on the highway Decor Web Site
Decor Employee - please print employee name:
Other:

Have you applied here before? YES NO If yes, when? \_\_\_\_\_

A - PERSONAL DATA

Telephone Number: Home: \_\_\_\_\_ Messages: \_\_\_\_\_

Place of Residence Street \_\_\_\_\_ Apt. \_\_\_\_\_
Town \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Mailing Address (if different) Street \_\_\_\_\_ Apt. \_\_\_\_\_
Town \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Table with 4 columns: Are you legally entitled to work in Canada?, Languages, Speak, Read, Write. Rows include English, High German, Low German.

Have you ever been bonded? No Yes If yes, on what jobs? \_\_\_\_\_

B - EMPLOYMENT DESIRED

Type of position sought
Office Permanent Full-time
Production Temporary Part-time

Expected Salary \$ \_\_\_\_\_ per hour Date available for work \_\_\_\_\_

Please note: Two week shift rotation Are you willing to work both Day and Evening shifts? Yes No

C - QUALIFICATIONS

Highest level of education completed \_\_\_\_\_ Degrees \_\_\_\_\_

Special Training \_\_\_\_\_ Other training \_\_\_\_\_

List trade licenses or certificates you possess \_\_\_\_\_ Issuing Province \_\_\_\_\_

If required, do you have a valid Driver's License? Yes No Class \_\_\_\_\_

**D – WORK HISTORY**

Name of present/last employer \_\_\_\_\_ Employed from: \_\_\_\_\_  
 Address \_\_\_\_\_ to: \_\_\_\_\_  
 Job title and description of work and responsibilities \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Name of Supervisor \_\_\_\_\_ Reason for leaving \_\_\_\_\_

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Name of previous employer \_\_\_\_\_ Employed from: \_\_\_\_\_  
 Address: \_\_\_\_\_ to: \_\_\_\_\_  
 Job title and description of work and responsibilities \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Name of Supervisor \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Please list any woodworking, painting or related manufacturing experience (if not listed above):

Organization:	Telephone Number:	List of duties:

**E – REFERENCES**

Name three persons who know your work and to whom we may refer in confidence:

Name	Position title and Organization	Telephone number

List any friends presently working for Decor Cabinets  
 \_\_\_\_\_

**Please Note:**

**Your application will be kept on file for three months.**

**We thank all applicants for their interest, however only those candidates selected for an interview will be contacted.**

**I hereby certify that the foregoing information is true and complete to the best of my knowledge. I understand that a false statement may disqualify me from employment, or cause my dismissal.**

**I understand that the foregoing information is collected to assess my suitability for employment. By signing this document, I am giving consent for Decor Cabinets to use and/or release this information for the purpose stated.**

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date