



Box 1690 Fort Macleod, AB  
TOL-0Z0  
Phone: (403) 715-3719  
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## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Province: \_\_\_\_\_ City: \_\_\_\_\_ Postal code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date available to start work: \_\_\_\_\_ Desired starting wage: \_\_\_\_\_ Full-time ☐ Part-time ☐

Position(s) applied for: \_\_\_\_\_

Have you ever worked for us before? ☐ Yes ☐ No

If hired, do you have reliable means of transportation to and from work? ☐ Yes ☐ No

Are you legally able to work in Canada? ☐ Yes ☐ No

### Education

Highschool: \_\_\_\_\_ City/Province: \_\_\_\_\_ Did you Graduate? ☐ Yes ☐ No

Post-Secondary: \_\_\_\_\_ City/Province: \_\_\_\_\_ Did you Graduate? ☐ Yes ☐ No  
Degree/Diploma/Certification: \_\_\_\_\_

### Previous Work Experience

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Company: \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

### Disclaimer and Signature

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal.

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