## SRS WINDOWS AND DOORS INC.

936 Tungsten St,

Thunder Bay, ON, Canada, P7E 2X2

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www.srswindoor.ca

## Date

## **Employment Application**

Name					
Address					
Province/State					
Postal Code/Zip					
Social Ins No.					
Home Phone					
Cell Phone					
Positions Applied	for:				
Salary Desired:					
HOURS AVAILABLE	TO WORK				
Monday			Friday		
Tuesday			Saturday		
Wednesday			Sunday		
Thursday					
Full-Time		Part-Time		Full or Part-Time	
When available to	begin work?				
EDUCATION					
Type of School	Name of School & Complete Mailing Address			No. Years Completed	Major or Degree

Have you ever been convicted of a crime?	Yes	No				
If yes, please explain:						
Do you have a drivers license?	Yes	No				
Province of Issue						
Have you had any accidents in the past 3 years?	Yes	No				
Have you had any moving violations in the past 3 years?	Yes	No				

Previous Employmen	t (list u <sub>l</sub>	o to 3)		
1				
1				
Name of Employer:				
Name of last Supervisor				
Dates of Employment	from		to	
Wage	from		to	
Complete Address				
Phone				
Last job title				
Reasons for leaving (be specific):				
List the jobs you held, duties perfo	ormed, adva	incements, or promotions while you	ı worked at this con	npany:
May we contact your employer?			Yes	No
2				
Name of Employer:				
Name of last Supervisor	fu a ma	] [	•	
Dates of Employment	from		to	
Wage	from		to	
Complete Address				
Phone				
Last job title				
Reasons for leaving (be specific):				
The state of the s				
List the Jobs you held, duties perfo	ormed, adva	incements, or promotions while you	ı worked at this con	npany:
May we contact your employer?	Yes	No		

3								
Name of Employe	er:							
Name of last Sup	ervisor							
Dates of Employment		from			to			
Wage		from			to			
Complete Addres	SS							
Phone								
Last job title								
Reasons for leavi	ng (be specific):							
May we contact y Skills Typing	our employer?	ormed, advar		or promotions whi	ile you worked		No	
Computer	PC		N	Мас		Both		
Applications								
Other Skills								
PLEASE LIST 2 RE	FENCES OTHER T	HAN RELATIV	ES & PREV	/IOUS EMPLOYERS				
Name								
Position								
Company								
Telephone								
Add any addition	al information ne	ecessary to d	escribe yo	our full qualification	ns for the posit	tion which y	ou are appliyr	ng: