

## **Application for Employment**

Name:								
(first)			(last)					
Address:								
Phone:			Email:					
Are you a Canad	If NO, do you have a permit to work in Canada?							
(Circle one)	YES	NO	(Circle one)		YES		١	10
Do you hold a valid driver's license? If NO, do you have a means to get to/from the job site?								
(Circle one)	YES	NO	(Circle one)	)	YES		١	10
What job are you	u applying for?							
When can you start? What day(s) are you available to work? (circle all that apply)								
(date)		N	10N TUE	WED	THUR	FRI	SAT	SUN
Have you read the full JOB DESCRIPTION provided?					YES	ES NO		
Have you ever worked for the Manitoba Cycling Association?						YES NO		
Are you willing to provide a criminal record check?					YES		NO	

Name School/Institutio	n Highest Level A	chieved	Dates	Dates		
	<u> </u>					
mployment	Dosition		Datas			
Name of Employer	Position		Dates			
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Signature	Date	