

GATEWAY CO-OPERATIVE LIMITED

APPLICATION FOR EMPLOYMENT



Please Complete in Full. Please Print Legibly:

Name:							
Address:							
Contact Number:			Alternate Contact Number:				
Email:							
Preference for: <input type="checkbox"/> Full-time status <input type="checkbox"/> Part-time status <input type="checkbox"/> Student status							
Availability: Please indicate with a <input checked="" type="checkbox"/> the shifts you are available to work each day							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							
Location(s) and Department(s) I am interested in:	Buchanan		Canora		Preeceville		Sturgis
	<input type="checkbox"/> Grocery		<input type="checkbox"/> Administration <input type="checkbox"/> Bakery <input type="checkbox"/> Convenience Store/Gas Bar <input type="checkbox"/> Deli <input type="checkbox"/> Grocery <input type="checkbox"/> Liquor Store <input type="checkbox"/> Meat <input type="checkbox"/> Produce		<input type="checkbox"/> Bulk Petroleum <input type="checkbox"/> Convenience Store/Gas Bar <input type="checkbox"/> Hardware <input type="checkbox"/> Lumber		<input type="checkbox"/> Grocery
Employment/Education History & References (Only complete this section if not attaching a resumé)							
Resumé Attached:		<input type="checkbox"/> Yes <input type="checkbox"/> No		Education:			
Company Name:			Position/Title:				
Employed from		To		Key Responsibilities:			
Reason for Leaving:							
May Gateway Co-op contact your previous employer?				<input type="checkbox"/> Yes <input type="checkbox"/> No			
Company Name:			Position/Title:				
Employed from:		To		Key Responsibilities:			
Reason for Leaving:							
May Gateway Co-op contact your previous employer?				<input type="checkbox"/> Yes <input type="checkbox"/> No			

Reference Name:		Title	
Contact Information:		Relationship to you:	
Reference Name:		Title	
Contact Information:		Relationship to you:	

Additional Information:

Were you referred by a Gateway employee?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Employee's Name:	
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Please complete the following:

Are you legally entitled to work in Canada?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a criminal offense who which a pardon has not been granted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed by Co-op?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you bondable?	<input type="checkbox"/> Yes <input type="checkbox"/> No
I am over the age of 14	<input type="checkbox"/> Yes <input type="checkbox"/> No

Personal Information:

The Gateway Co-operative Limited is collecting your personal information provided by way of this application form, and will use and disclose your personal information, only for reasonable purposes related to potentially establishing, if hired, managing and terminating your employment relationship with Gateway Co-operative Limited. Without limiting the foregoing, Gateway Co-operative Limited may disclose the personal information that you provide by way of this application form to a third party service providers (such as payroll and benefits companies under contract with the Co-operative, background check service providers). Gateway Co-operative Limited has implemented reasonable measures to ensure that the personal information which you provide to it is maintained accurately, kept current and only for a reasonable amount of time, is secure and confidential.

Applicant Consent:

I consent to provide work related references, complete a criminal record check or any other verification that may be required as it relates to the position I am being considered for. In signing this application form, I understand that any misrepresentations or omissions of facts is cause for cancellation of the application or termination from employment.

Signature of Applicant:		Date:	
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HR Use Only:	
Date Received: _____	Application will be kept until: _____
Application is for: <input type="checkbox"/> General employment <input type="checkbox"/> Posted Position _____	Posting Reference Number: _____
Application has: <input type="checkbox"/> Copied & circulated <input type="checkbox"/> Forward onto team leader <input type="checkbox"/> Recorded and filed	
P	