



Town of Kapuskasing

88 Riverside Drive, Kapuskasing, Ontario P5N 1B3
 Telephone: (705) 335-2341 Facsimile (705) 337-1741

APPLICATION FOR EMPLOYMENT

DATE _____

FAMILY NAME _____ GIVEN _____
 NAMES _____

ADDRESS _____ STREET _____ APT. _____ MUNICIPALITY _____

PROVINCE _____ POSTAL CODE _____ TELEPHONE _____

POSITION APPLIED FOR: ACCOUNTING CLERK

POST-SECONDARY GRADUATE WITH DIPLOMA IN BUSINESS, COMMERCE OR ACCOUNTING Yes No

MINIMUM TWO (1) YEARS OF EXPERIENCE IN ACCOUNTING & COMPUTERS Yes No

BILINGUAL Yes No

COMPUTER KNOWLEDGE OF EXCEL, WORD, SIMPLY ACCOUNTING AND VADIM Yes No

VALID DRIVER'S LICENCE Yes No

EDUCATION			
SCHOOL	GRADE COMPLETED	DATE COMPLETED	DIPLOMA; CERTIFICATE OR DEGREE RECEIVED
SECONDARY			
COLLEGE			
UNIVERSITY			
OTHER			

EMPLOYMENT		
PRESENT EMPLOYER	TYPE OF BUSINESS	FROM
ADDRESS	POSITION AND DUTIES	TO
REASON FOR LEAVING		

PREVIOUS EMPLOYER	TYPE OF BUSINESS	FROM
ADDRESS	POSITION AND DUTIES	TO

REASON FOR LEAVING

PLEASE PROVIDE SKILLS, WORK EXPERIENCE OR TRAINING; AND OTHER INFORMATION.

REFERENCES

NAME	POSITION
ADDRESS	TELEPHONE

NAME	POSITION
ADDRESS	TELEPHONE

APPLICANT: PLEASE READ CAREFULLY

I hereby certify that to the best of my knowledge and belief, the answers given by me in this application are accurate, current and honest. I understand that any false information can cause this employment application to be rejected.

SIGNATURE OF APPLICANT