



SNC • LAVALIN

EMPLOYMENT APPLICATION

Return to:
SNC-Lavalin
Attention: Human Resources
1754 Route 640
Hanwell, NB E3C 2B2
Fax: (506) 474-7752
E-mail: brunwayjobs@snclavalinom.com

Competition #

PART A
THIS SECTION MUST BE COMPLETED BY ALL APPLICANTS. You may attach a current résumé detailing your employment history, educational background, special skills and abilities or complete Part B. Incomplete applications will not be considered.

The personal information requested herein is collected under the authority of the Freedom of Information and Protection of Privacy Act for the purpose of considering your application for employment.

NAME IN FULL (Please Print):			DATE OF APPLICATION:		
Surname	First	Middle	DATE AVAILABLE TO START WORK:		
MAILING ADDRESS:			HOME TELEPHONE:		
Apt/Street #	City	Province	OTHER CONTACT or EMAIL:		
Postal Code		Country			
WORK LOCATION:					
Would you accept employment anywhere in New Brunswick?					
Yes <input type="checkbox"/> No <input type="checkbox"/>					
PREFERENCE:					
<input type="checkbox"/> Meductic					
<input type="checkbox"/> Centerville					
<input type="checkbox"/> Saint Leonard					
POSITION OF INTEREST / TYPE OF WORK DESIRED:					
I WOULD LIKE TO BE CONSIDERED FOR:			AVAILABILITY:		
<input type="checkbox"/> Full-time			<input type="checkbox"/> Days		
<input type="checkbox"/> Part-time			<input type="checkbox"/> Evenings		
<input type="checkbox"/> Casual			<input type="checkbox"/> Weekends		
<input type="checkbox"/> Temporary			<input type="checkbox"/> Shifts		
<input type="checkbox"/> Summer			<input type="checkbox"/> Nights		
<input type="checkbox"/> Co-op					
HOW DID YOU HEAR ABOUT US? (Referral source)					
<input type="checkbox"/> Newspaper		<input type="checkbox"/> Employee Referral			
<input type="checkbox"/> Website		<input type="checkbox"/> Other -			

Are you legally entitled to work in Canada? Yes No

English French Other _____

Languages Spoken

Languages Written

Do you have a valid New Brunswick driver's license? Yes No Class _____

PART B

EMPLOYMENT HISTORY: Begin with your current or most recent employer. You do not need to complete this section if you are attaching a resume that contains the information requested

DATES OF EMPLOYMENT: FROM _____ TO _____	STATUS: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other
EMPLOYER:	POSITION(S) HELD:
ADDRESS:	TELEPHONE:
NAME & TITLE OF SUPERVISOR:	REASON FOR LEAVING:
DESCRIBE WORK & RESPONSIBILITIES:	

Is it ok to contact this employer for reference? Yes No

DATES OF EMPLOYMENT: FROM _____ TO _____	STATUS: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other
EMPLOYER:	POSITION(S) HELD:
ADDRESS:	TELEPHONE:
NAME & TITLE OF SUPERVISOR:	REASON FOR LEAVING:
DESCRIBE WORK & RESPONSIBILITIES:	

Is it ok to contact this employer for reference? Yes No

DATES OF EMPLOYMENT: FROM _____ TO _____	STATUS: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Other
EMPLOYER:	POSITION(S) HELD:
ADDRESS:	TELEPHONE:
NAME & TITLE OF SUPERVISOR:	REASON FOR LEAVING:
DESCRIBE WORK & RESPONSIBILITIES:	

Is it ok to contact this employer for reference? Yes No

EDUCATION (Documents of proof may be required upon offer of employment)

Secondary

Highest grade completed in school

Post Secondary (University, Technical, Trade, Business or Other)

Institution	Degree, Certificate or Diploma Obtained

ADDITIONAL INFORMATION:

Please provide any additional relevant information that you consider to be related to the position for which you are applying. (Please use separate sheet if necessary).

PART C – DECLARATION

- I declare that all of the information I have provided in this application for employment and in any other documents accompanying this application is complete and true in every respect.
- I understand that any failure to completely and truthfully answer the questions asked of me, when discovered, will constitute grounds for immediate rejection of my application. If I have been hired and am an employee when a failure to completely and truthfully answer the questions is discovered, this will constitute sufficient grounds for my dismissal for just cause.
- I understand that personal information provided in this application will be regarded as confidential pursuant to the Freedom of Information and Protection of Privacy Act.

Signature of Applicant

Date

Incomplete and unsigned applications will not be considered.

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Thank you for your interest in employment with SNC-Lavalin. SNC-Lavalin considers the qualifications, education, and experience of all applicants and selects the most qualified candidate for each position.