

Human Resources Department 169 Front Street Belleville, ON K8N 2Y8 Phone: 613-968-6481

Fax: 613-967-3225

The information collected on this form is collected in accordance with the Personal Information Protection and Electronic Act (PIPEDA) and the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). This information will be used for employment purposes only. Any questions regarding employment should be directed to the Human Resources Department.

questions regarding employment sh		n Resources Department.  eted form or complete manually	why DDINTING all information		
<u>=</u>		·	y by PRINTING all Information.		
Are you legally entitled to work in Calf the City has previously employed		ate available to work			
in the City has previously employed	you, state when and departin	iciil.			
f you have relatives now employed	by the City, state relationship	and department:			
APPLICANT					
Name:					
(Last Name)	(First Name)	(Initial)			
Address:					
(Street)		(Apt/Unit) (City)	_		
	Telephone (Home)	Other:			
Are you between the ages of 18 ar	nd 65? Yes No Date of	of Birth (If under 18 yrs of age)			
EDUCATION	ada Canadatad) Caad	lusting Van Na			
Elementary / High School (Last Gra	Course or Subject	luation Yes No  Certificate/Diploma	Completed		
Technical/Vocational	Course or oubject	Certificate/Diploma	Completed		
College/University					
Are you a full-time student? Ye	s No Do you plan to retur	n to school next term? Yes	No		
1. Name of Employer:		Your position Title			
From: To:		Job Duties:			
Address:					
Tel. No.	_				
Supervisor's Name:		Salary:	Salary:		
Supervisor's Title:		Reason for leaving:	Reason for leaving:		
2. Name of Employer:		Your position Title			
From: To:		Job Duties:	_		
Address:					
F			·		
Tel. No.					
Supervisor's Name:		Salary:			
Supervisor's Title:		Reason for leaving:			
3. Name of Employer:		Your position Title			
From: To:		Job Duties:			
Address:					
Tel. No.		l			

Supervisor's Name:	Salary:
Supervisor's Title:	Reason for leaving:

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## Application for Volunteer Firefighter City of Belleville

RELATED SKILLS					
SOFTWARE					ADDITIONAL QUALIFICATIONS:
TITLE	VERSION	BEG.	INT.	ADV.	Including certificates, licences, equipment operation and
	Ţ				professional designations, and other skills, experience or training related to your application.
	:				daming related to your application.
					-
Other Office Skills:	·				
1					
Ì					
DRIVING RECORD					
Do you currently hold a val	lid Ontario Drivers Licenc	e? 🔲	Yes	No	
Driver's Licence Class G	Z-Endorsement?	Yes		No	
Do you have demerit points	anainat vava linanaa	Vas	III N	. к.	'ES, how many?
	-			אוו כ	ES, now many?
Have you ever hand your I	icence suspended?	Yes 📗	□ No	lf `	YES, when?
	Status of Di	river's	Licer	nce an	d driving record will be verified.
Have vo	ou every been convicted	of a cr	iminal	offenc	e in Canada for w hich a pardon has not been granted?
	Ju 0101, 20011 00111.010u	0. 0. 0.		Ye	
					3 🗀 140
11	and the the feet		41. * .	41. *	. Poster and a station bank of the land of
					oplication are true to the best of my knowledge.
i understand tr	nat ir em pioyed, taisiti	easta	teme	nts on	this application will be considered cause for dismissal.
I,				а	uthorize the City of Belleville to contact the persons or organizations liste
within this application, for t	the purpose of obtaining	referen	ce inf	ormatic	on contained in my personnel file.
If NO, check w hich number	r(s) 1 2 3				Date
110, oncon winon number		Signatur	e of /	nnlica	
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The City of Relleville	is an Equal Opportunit	v Fm n	lover	and e	upports the sprit and intent of the Ontario Human Rights Code.