



**City of Kamloops
Human Resources Department
105 Seymour Street West
Kamloops BC V2C 2C6 (250) 828-3439
Fax (250) 372-1351 www.kamloops.ca**

FOR EXTERNAL APPLICANTS ONLY

**APPLICATION FOR
EMPLOYMENT**

Position Applied For _____ Competition No. _____

Date Available _____

Personal Data

Name _____
Surname _____ Full Given Name(s) _____

Address _____
Apt. No., Street Address, PO Box, etc.

City _____ Province _____ Postal Code _____

Telephone Number: Home _____ Business _____

Other _____
Message, Pager, etc.

Do you have a valid BC Driver's Licence? Yes No

Employment History

Name of Employer _____ Name of Supervisor _____

City _____ Province _____ Telephone Number () _____

Job Title _____ Main Duties _____

From/To (yy/mm) _____ Rate of Pay _____

Reason for Leaving _____ May we contact this employer? Yes No

Name of Employer _____ Name of Supervisor _____

City _____ Province _____ Telephone Number () _____

Job Title _____ Main Duties _____

From/To (yy/mm) _____ Rate of Pay _____

Reason for Leaving _____ May we contact this employer? Yes No

Name of Employer _____ Name of Supervisor _____

City _____ Province _____ Telephone Number () _____

Job Title _____ Main Duties _____

From/To (yy/mm) _____ Rate of Pay _____

Reason for Leaving _____ May we contact this employer? Yes No

Educational Background

Secondary School _____ Year Completed _____
 Program Completed _____
 Relevant Courses _____

 College/University _____ Year Completed _____
 Program Completed _____
 Relevant Courses _____
 Other Course(s) Taken _____

 Course(s) Currently Enrolled In _____

Additional Qualifications, Skills, or Experience

List additional qualifications, skills, or experiences relevant to the position for which you are applying.

TO BE FILLED IN BY LABOURER, TRUCK DRIVER, EQUIPMENT OPERATOR, TRADES, AND SIMILAR APPLICANTS.			
Driver's Licence Number	Drivers Licence Class <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6	Air Brakes Endorsement <input type="checkbox"/> Yes <input type="checkbox"/> No	Province of Issue
List construction and maintenance equipment operated below.		Length of Experience	
Type and size of truck or equipment		Years	Months

General Information

List leisure activities and interests. Provide any further information which could assist the City of Kamloops in considering your application for employment. (Attach additional page if necessary.)

References (other than relatives)

NAME	ADDRESS	TELEPHONE	OCCUPATION
1.			
2.			
3.			

APPLICANT'S DECLARATION

1. That all statements made in this application are true and I understand that any misstatements of material facts herein may cause forfeiture of my rights to employment with the City of Kamloops.
2. That I understand appointment to any position is dependent upon successful completion of applicable probationary period.
3. That the City of Kamloops may contact my former employers to obtain references.

Applicant's Signature: _____ Date: _____