

INFINITY BELTING LTD

HEADOFFICE 17 GOERTZ AVE STONY PLAIN, ALBERTA, T7Z0H6

Employment Application

Position applie	ed for				Date		
		Appli	icant	Information			
Full Name:							
	Last Name / Surname			st name	Middle na	me (Optional)	
Address:							
	5	Street Address			A	lpartment/Unit #	
	City			Province		Post Code	
Phone:				Email:			
Date Availat	ole:						
	Are you a citizen of Canada?	YES	NO	If no, are you authori	zed to work in Ca	YES NO anada?	
	Have you ever worked for Infinity Belting before?	YES	NO	If yes, when? (Year)			
-			Edu	cation	_	_	
Level of Education High School		ol	Vocationa		nal (Trade)Trainii	l (Trade)Training Provider	
	Universit	University				Other	
Name of Edu	ucation Provider:						
_			Refe	rences	_	_	
Please list t	wo professional references						
Full Name:				F	Relationship:		
Company:							
Full Name:				F	Relationship:		
Company:					Phone:		

	Most Recent Previous/C	urrent Employı	nent					
Company:			Phone:					
Address:								
Job Title:								
Responsibilit	ies:							
From: To: Reason for Leaving: YES NO May we contact your previous supervisor for a reference?								
Military Service <i>(if applicable)</i>								
Branch:		Fro	om:	To:				
Rank at Disch	harge:	Type of Dischar	ge:					
If other than honorable, explain:								
Disclaimer and Signature								
I certify that my answers are true and complete to the best of my knowledge.								
I understand that by providing false or misleading information in my application or interview this may result in removal from the employment consideration process or termination of employment.								
Signature:			Date:					

Email completed form to: admin@infinitybelting.com