

ST. JAMES-ASSINIBOIA SCHOOL DIVISION

2574 Portage Avenue, Winnipeg, Manitoba, R3J 0H8

Phone: 204-888-7951 Fax: 204-831-0859 http://www.sjasd.ca

Great Schools for Growing and Learning

APPLICATION FOR MAINTENANCE STAFF EMPLOYMENT

Reasonable accommodations are available for persons with disabilities on request

	Job Vacano	y No.	<u> </u>
(Check One)	 □ Caretaker □ Casual Event Staff □ Trades (Plumber, Carpenter, etc.) □ Bus Driver 	☐ Cleaner ☐ Assistant Cle ☐ Casual (Clea ☐ Other	
PERSONAL INF	ORMATION		
Surname:		Given Names:	
Address:			
City/Province: _		Posta	l Code:
Mailing Address:	Same as above or:		
Home Phone: _	()-	Work Phor	ne: ()-
Cell Phone:	()-	E-Mail:	
Other name(s) u	nder which you worked or were educate	ed:	
Have you been e	employed by this Division? Yes	No If yes, when?	
Position?		Location?	
Are you legally e	ntitled to work in Canada? Yes	No 🗆	
Have you ever b	een charged with a criminal offence for	which a pardon has not been gr	anted? Yes 🗌 No 🗌
If "Yes", give par	ticulars of the charge, date and result ir	n each case:	
EDUCATION AN	ID QUALIFICATIONS		
Highest School (Grade Completed:	Year: Sch	ool:
Boiler Experienc	e: No. of Years: Power Er	ngineer Class: Pow	er Engineer Certificate #:
Trade Experienc	e: (Indicate if licensed):		
 Decer	nber 2020		

Driver's License: Yes ☐ No ☐ Class	School Bus Driver's Certificate:
List types of equipment and machinery which you ca	an operate and other trade skills you have learned:
_	
Special interests and aptitudes:	
EMPLOYMENT HISTORY (Present or most recen	t position first)
Name of Employer, Company or Agency	
Employer, Company or Agency Address	
From (Month/Year) to (Month/Year)	
Position & Major Job Duties	
Office Phone No.	
Supervisor's Name	
Present or Final Salary	
Reason for Leaving	
Name of Employer, Company or Agency	
Employer, Company or Agency Address	
From (Month/Year) to (Month/Year)	
Position & Major Job Duties	
Office Phone No.	
Supervisor's Name	
Present or Final Salary	
Reason for Leaving	

Name of Employer, Company or Agency	
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From (Month/Year) to (Month/Year)	
Position & Major Job Duties	
Office Phone No.	
Supervisor's Name	
Present or Final Salary	
Reason for Leaving	
	vities, hobbies, or sports with which you are involved. Information or family status, religious or political beliefs is optional and not required. n consideration of your application.
WORK-RELATED REFERENCES	
Please provide the names and addresses of at least	three people whom we may contact with regard to your application. Be

sure to select people to comment on your suitability for this position. Also include your last supervisor.

Name	Address & Postal Code	Relationship	Telephone

I understand that the information provided by me in this application for employment by the St. James-Assiniboia School Division ("the Division") constitutes material and important representations by me intended to induce the Division to enter into a contract of employment with me. I understand that if my application was submitted on-line, that my submission is considered an equivalent constitution. I therefore understand and agree that the giving by me of false, misleading or incomplete information in this application for employment will constitute just cause for dismissal of me from any employment entered into with me by the Division and will also fully justify the Division in treating any contract entered into with me as null and void.

Upon an offer of employment, I hereby consent to the Division conducting a personal investigation under the terms of the Personal Investigations Act, including a child abuse registry check and a criminal record check. And, I agree to present an original birth certificate and social insurance number card for copying as well as copies of any additional required documentation in support of my application.

The personal information contained on this form is collected and protected under the authority of the Public Schools Act (PSA), the Personal Health Information Act (PHIA) and the Freedom of Information and Protection of Privacy Act (FIPPA) and will be used and disclosed for personnel administration and payroll purposes. I understand this will include the ongoing disclosure of my current name, address and phone number to the appropriate union or association I am a member of. Further, I understand that any other collection, use or disclosure of this personal information will not be permitted without my consent, unless authorized under the PSA, PHIA or FIPPA. Furthermore, any questions I have about the collection, use or disclosure of this information, can be directed to the Access and Privacy Officer, St. James-Assiniboia School Division, 2574 Portage Avenue, Winnipeg, MB R3J 0H8, (204) 888-7951.

If employed, I a	agree to abide b	y the policies,	procedures	and working	conditions	established b	y the Div	ision.
SIGNATURE:					DATE: _			

NOTE: PLEASE COMPLETE ALL SECTIONS OF THE APPLICATION FORM ACCURATELY AND FULLY

