



**GENERAL INFORMATION**

Credit Union Name and Address (the "Credit Union")

DATE

**PERSONAL INFORMATION**

Applicant (Full Legal Name)

Address (number, street, city, province, postal code)

Telephone No. (Residential)

(Business)

Are you of legal working age?  Yes  No

Are you legally entitled to work in Canada?  Yes  No

Credit Union employees are required by regulatory authority to be bonded. Are you eligible to be bonded?  Yes  No

If you have any physical or mental limitations, do you require accommodation in order for you to perform your job?

No  Yes (If Yes, please explain.)

**EMPLOYMENT DESIRED**  See resumé attached.

Type of Employment  Full-time  Part-time (Specify hours and days):

Position Applied For

Salary Expected

\$

Annually  Hourly

Location(s) Preferred

Date Available

**INFORMATION RELATED TO POSITION APPLIED FOR** (Complete only if information required for position applied for.)  See resumé attached.

Are you related to a current employee or director of the Credit Union?  Yes  No

(If Yes, please specify name, department, branch.)

Do you have a valid BC driver's licence?  Yes  No

**Languages:**

English  Spoken  Written

French  Spoken  Written

Other  Spoken  Written

Other  Spoken  Written

Other  Spoken  Written

**Computer Skills:**

Yes  No Banking System Software (specify)

Yes  No Word Processing Software (specify)

Yes  No Spreadsheet Software (specify)

Yes  No Other Equipment/Software (specify)

Typing Speed (wpm)

Data Entry Speed

**EDUCATION AND TRAINING**  See resumé attached.

TYPE	NAME OF INSTITUTION	MAJOR SUBJECTS	DIPLOMA OR DEGREE COMPLETED	DATE COMPLETED
Secondary School				
College				
University				
Professional Designations, Diplomas, or Licenses				
Other Training				

**BUSINESS/PROFESSIONAL REFERENCES**  See resumé attached.

	NAME	COMPANY	POSITION OR RELATIONSHIP	YEARS KNOWN	TELEPHONE NO
1					
2					
3					

**EMPLOYMENT HISTORY**  See resumé attached.**Most Recent Position**

Date of Employment From: (mmm/yyyy)      To: (mmm/yyyy)      Salary Received  
 \$  Annually  Hourly

Business Name and Address      Telephone No.

Position Held      Immediate Supervisor's Name

Type of Business      Reason for Leaving

Job Responsibilities

**Previous Position**

Date of Employment From: (mmm/yyyy)      To: (mmm/yyyy)      Salary Received  
 \$  Annually  Hourly

Business Name and Address      Telephone No.

Position Held      Immediate Supervisor's Name

Type of Business      Reason for Leaving

Job Responsibilities

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**EMPLOYMENT HISTORY (continued)****Previous Position**

Date of Employment From: (mmm/yyyy)	To: (mmm/yyyy)	Salary Received
		\$ <input type="checkbox"/> Annually <input type="checkbox"/> Hourly
Business Name and Address	Telephone No.	
Position Held	Immediate Supervisor's Name	
Type of Business	Reason for Leaving	
Job Responsibilities		

**Previous Position**

Date of Employment From: (mmm/yyyy)	To: (mmm/yyyy)	Salary Received
		\$ <input type="checkbox"/> Annually <input type="checkbox"/> Hourly
Business Name and Address	Telephone No.	
Position Held	Immediate Supervisor's Name	
Type of Business	Reason for Leaving	
Job Responsibilities		

**Previous Position**

Date of Employment From: (mmm/yyyy)	To: (mmm/yyyy)	Salary Received
		\$ <input type="checkbox"/> Annually <input type="checkbox"/> Hourly
Business Name and Address	Telephone No.	
Position Held	Immediate Supervisor's Name	
Type of Business	Reason for Leaving	
Job Responsibilities		

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**CERTIFICATION**

I certify that the information given in this Application, including my resumé, covering letter, or any other supporting materials provided by me is true and complete to the best of my knowledge. I understand and agree that any false statement(s) or the inability to be bonded will disqualify me from being hired or, if offered employment, will be sufficient cause for my dismissal.

I consent to the Credit Union, or its agents or representatives, contacting the references listed on this Application or provided by me.

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**X**

Applicant Signature

Date