

# Canada - Application for Employment



All employee candidates are required to complete this TriNet Employment Application. Upon completion, **fax to TriNet at (775) 333-8852** for processing.

TriNet Canadian Services  
9805 Double R Boulevard  
Reno, Nevada 89511

## Company Information

**Please Print**

NAME	LOCATION	DATE
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## Applicant Information

LEGAL NAME as shown on your Social Insurance Card			
Last	First	Middle	
COMPLETE HOME ADDRESS include PO Box, Apt. #, etc.			
Street	City	Province	Postal Code
HOME PHONE	BUSINESS or OTHER PHONE	E-MAIL ADDRESS	
( ) -	( ) -		

## Position Applying For

JOB TITLE/TYPE OF WORK	HAVE YOU WORKED FOR THIS COMPANY BEFORE?		
	<input type="checkbox"/> Yes When: <input type="checkbox"/> No		
ARE YOU LEGALLY ELIGIBLE TO WORK IN CANADA?	AVAILABLE START DATE	DAYS AVAILABLE TO WORK	
<input type="checkbox"/> Yes <input type="checkbox"/> No			
HOW DID YOU LEARN ABOUT THIS OPENING?			

## Education

	MAJOR or NAME OF PROGRAM	NO. OF YEARS COMPLETED	GRADUATE Yes/No	DIPLOMA, DEGREE LICENSE or CERTIFICATE
UNIVERSITY				
COMMUNITY COLLEGE				
BUSINESS or TRADE SCHOOL				
SECONDARY SCHOOL				
OTHER SKILLS, EXPERIENCE or TRAINING RELATED TO THE JOB YOU ARE APPLYING FOR:				

**BE SURE TO COMPLETE PAGE 2**

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**COMPLETE ALL JOB HISTORY INFORMATION REGARDLESS OF RESUME ATTACHMENT**

May we contact your current employer?  Yes  No

**Employment History** list current/most recent position first

NAME of EMPLOYER	ADDRESS/LOCATION	DATES EMPLOYED From _____ To _____	
TYPE of BUSINESS	POSITION/TITLE	SALARY Starting _____	Final _____
MANAGER'S NAME	MANAGER'S TITLE	PHONE (    )    -	
LIST YOUR DUTIES/RESPONSIBILITIES			
REASON FOR LEAVING:			
NAME of EMPLOYER	ADDRESS/LOCATION	DATES EMPLOYED From _____ To _____	
TYPE of BUSINESS	POSITION/TITLE	SALARY Starting _____	Final _____
MANAGER'S NAME	MANAGER'S TITLE	PHONE (    )    -	
LIST YOUR DUTIES/RESPONSIBILITIES			
REASON FOR LEAVING:			
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MANAGER'S NAME	MANAGER'S TITLE	PHONE (    )    -	
LIST YOUR DUTIES/RESPONSIBILITIES			
REASON FOR LEAVING:			

## APPLICANT'S CERTIFICATION AND RELEASE

I certify that the facts given in my resume' and/or Application for Employment are true and correct and authorize you to verify same. I understand that if employed, any false or misleading statements, omissions, or failure to fully answer any requested item on this application or on any document used to secure employment shall be grounds for rejection of this application or for my termination from employment, if I am employed, regardless of when such information is discovered.

I understand that nothing contained in the application, or information conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between me and the Company. I understand that no supervisor, manager, or executive of the Company has any authority to alter the foregoing unless a specific term of employment is in writing and signed by the Company President.

APPLICANT SIGNATURE	DATE
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