

## MUNICIPAL DISTRICT OF PROVOST NO. 52

## APPLICATION FOR EMPLOYMENT

DATE	
NAMEADDRESS	
PHONE	
DATE OF BIRTH	
DRIVER'S LICENCE NO CL	ASS
TYPE OF JOB BEING APPLIED FOR:	
NAME OF LAST EMPLOYER:	
QUALIFICATIONS AND EXPERIENCE: (attach Resume if	available)
It is the M.D.'s policy that all employees who drive mu driver's abstract and if applicable, a copy of their Clas employment and is at the cost of the employee. If requested for an interview, I agree to supply these	ss 1 certificate. This is a condition of pre-
Signature	
I give consent to the M.D of Provost #52 to disclose this information to other public bodies for the purpose of applying for other positions for one year.	
Signature	

This personal information is being collected under the authority of Section 32C of Freedom of Information and Protection of Privacy Act, and will be used for payroll purposes.

If you have any questions about the collection contact the Administrator at 753-2434 or 857-2434.