

APPLICATION FOR EMPLOYMENT

Hamilton Kent Inc.

**A COMPLETED HAMILTON KENT INC. EMPLOYMENT APPLICATION FORM IS REQUIRED FOR EACH JOB FOR WHICH YOU APPLY.
YOU MAY SUBMIT A RESUME ONLY IN ADDITION TO A COMPLETED APPLICATION.**

Please be aware that any resume submitted without a completed application form will not be accepted and will be returned. Your qualifications will be evaluated based on the information submitted in your application. Failure to provide sufficient information on your application will result in disqualification.

Various Provincial laws prohibit discrimination in employment practices because of: race, national or ethnic origin, colour, religion, sex, age, citizenship, sexual orientation, record of offenses, marital status, family status or disability.

Please type or print in ink. Be sure to answer all questions. If any questions do not apply to you, answer with "No" or "N/A".
For any areas duplicated on your resume, you may also answer "see resume".

Position applied for		Date you will be available for if your application is accepted?	
Have you ever worked for Hamilton Kent Inc. before: <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?	
Have you ever applied to work at Hamilton Kent Inc. before: <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?	
Are you willing to relocate to another city? <input type="checkbox"/> Yes <input type="checkbox"/> No	Preference		
How did you hear of this position?	If you have been referred by a current Hamilton Kent Inc. employee, please state who you have been referred by.		

GENERAL INFORMATION

Last Name	First	Middle
Present Address	City	Province Postal Code How long?
Previous Address	City	Province Postal Code How long?
Home Telephone Number	Business Telephone Number	
Are you legally eligible to work in Canada?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a criminal offense for which a pardon has not yet been granted?		<input type="checkbox"/> Yes <input type="checkbox"/> No
In the course of your employment, it may be required for you to be bonded. In that case your ability to be bonded may determine the functions that you may perform on behalf of the company. Do you understand and agree to this condition?		<input type="checkbox"/> Yes <input type="checkbox"/> No
The job you're applying for may involve spending your time in the plant/distribution centre environment requiring varying degrees of physical tasks such as stooping, bending, lifting, carrying, stacking, etc. Are you physically capable of executing the position's specific duties?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to work shifts, including nights and 8 hours per day?		<input type="checkbox"/> Yes <input type="checkbox"/> No

ACTIVITIES

Current membership in Civic, Professional, Social or other organizations*

Past membership in Civic, Professional, Social or other organizations*

Sports, Hobbies and other interests*

* Exclude those which indicate race, national or ethnic origin, colour religion, sex, age, sexual orientation, marital status or disability

SUMMARY OF QUALIFICATIONS

This space is provided for you to briefly summarize any additional qualifications you feel are important in considering your application for employment

APPLICANT'S STATEMENT

I certify that all statements on this application for employment are true and complete to the best of my knowledge. I authorize Hamilton Kent Inc. and its representatives to inquire of all former employers or others who know me or know of me and for those employers or people to respond to such inquiries relevant to my candidacy and my employment.

Further, I authorize the deduction from my pay of the periodic payment in respect of any benefit or retirement plan for which I may become a participant in the course of my employment and which requires an employee contribution.

Applicant's Signature: _____

Date _____
(mm / dd / yyyy)

Note: It is the practice and the code of ethics of Hamilton Kent Inc. to treat the information contained in an employee's file with the utmost confidentiality. The purpose of the file is to assist in the review of an employee's qualifications for advancement or the assumption of additional responsibilities.

Only duly authorized persons (i.e. persons who require knowledge of the information in the performance of their duties) have access to the information in the employee file. The file will be kept in the Human Resources Department where the information is required.

The file may be reviewed and rectified, if necessary, by the employee upon a written request directed to the attention of the appropriate Human Resources Manager.

Do Not Write Below This Line

For Office Use Only

First Shift Date	Location	Position	Interviewed By 2nd Interview By	Hired By	Employee No. Payroll Signature
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