



**Prince Albert Group Home Society**

203 31<sup>st</sup> Street East, Prince Albert, Saskatchewan S6V 8A8

Phone 1 306 922 2544

Fax 1 306 922 2959

**APPLICATION FOR EMPLOYMENT**

**Instructions**

Please complete the application form in its entirety and attach a copy of your resume as well.

1. Date of Application \_\_\_\_\_

2. Name \_\_\_\_\_ Email \_\_\_\_\_  
Last First Middle/ Initial

3 Present Address \_\_\_\_\_ Phone Number \_\_\_\_\_  
Box / Apartment / Street

4. City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

5. Are you at least 18 years of age at the date of application? \_\_\_ Y \_\_\_ N

6. Are you legally entitled to work in Canada? \_\_\_ Y \_\_\_ N

7 Do you have a Saskatchewan Driver's License? \_\_\_ Y \_\_\_ N Class? \_\_\_\_

9. Please indicate the date you are available for work? \_\_\_\_\_

**IMPORTANT EMPLOYMENT CONSIDERATIONS**

The Prince Albert Group Homes Society Inc. (PAGHS) is a licensed service provider of residential and community-based supports for adults with intellectual and physical disabilities. Please review the list of sample job related demands below:

Cognitive / Emotional demands included in this position:

- Extended periods of mental focus and reading comprehension
- Dealing with stressful and unpredictable situations including *crises*
- Problem solving and complex decision making skills
- Report Writing
- Use of short and long term memory
- Use of specialized equipment and procedures

Physical demands associated with this position:

- Regular / constant physical activity
- Bending, kneeling, pushing and pulling
- Lifting / Transferring residents
- Shift work

10. With the understanding that PAGHS provides 24hr / 7 day per week care for the people we support, are you willing to take "shiftwork" as assigned?  Y  N

11. Supporting persons with disabilities often involves some transferring of residents. Describe any limitations you may have in regards to your ability to lift.

12. Do you have a disability that will affect your ability to perform any of the functions of the job for which you have applied?

Y  N If yes, complete (a) below

(a) What functions can you not perform and what accommodations could be made which could allow you to do the work adequately?

13. Describe any known allergies [e.g., food, products, pets etc.]

14. Please list two (2) **former employers** and two (2) **personal references** who are in a position to comment on your general character, motivation and employment record and who can evaluate your qualifications for the work in which you are interested. **DO NOT** include close relatives. **PLEASE** include **COMPLETE** addresses with postal codes and phone numbers.

	Name	Address	Phone	Occupation
Former Employer				
Former Employer				
Personal				
Personal				

15. Education: indicate highest level completed;

a) High School  Gr.10  Gr.11  12 Other \_\_\_\_\_

b) College / University  1  2  3  4 Other \_\_\_\_\_

16. Schools attended: [List in chronological order]

Name of School	Location	Dates attended	Degree / Diploma / Year received	Field of emphasis / major

17. Additional training scholarships honors, awards, certificates etc.:

18. What languages, in addition to English can you speak / write? \_\_\_\_\_

ESL courses taken: \_\_\_\_\_ Levels obtained: \_\_\_\_\_

19. Work experience: List jobs in chronological beginning with your most recent position.

Date [month/year]	Employer's address	Duties and skills
From		
To		
From		
To		
From		
To		
From		
To		

20. May we contact your present or any previous employer about your employment record? \_\_ Y \_\_ N

21. May we call you during the day at your place of employment \_\_ Y \_\_ N If yes phone # \_\_\_\_\_

22. List below any special interests or abilities:

23. Briefly describe your work related training, experience and responsibilities. Include relevant volunteer experiences as well.

24. What are your long-range career goals / interests? Please be specific.

25. In terms of your personal life's goals, what is most important to you and why?

26. Which of the following work situations suits you best? Why?  
 Independent    Semi-independent    Team

27. Describe your ability to work with others in a group setting. [Identify your strengths and potential contributions].

**CERTIFICATION:**

My signature below certifies that all information in this application is correct and complete to the best of my knowledge and belief. I understand that intentionally providing false information could result in refusal of employment or dismissal. I also authorize the employers, schools, or persons named above to provide information regarding my employment, education, character and qualifications.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_