



Health Care Aid Course/Personal Care Attendant Course

Institution

Date Completed

Certificate of Competence

Institution

Date Completed

**POSITION INFORMATION**

Position(s) Applied for \_\_\_\_\_

Date Available

**Please check all that apply**

Type of work preferred: Full-time  Part-time  Casual  Summer

Shifts/Days able to work: Days  Evenings  Nights  Weekends  Weekdays

**EMPLOYMENT HISTORY**

<b>Current or Last Employer</b>	Employer's Name and Address			Postal Code
Telephone	Name of Supervisor	Position Held	From (yyyy/mm)	To (yyyy/mm)

Reason for leaving

<b>2<sup>nd</sup> Last Employer</b>	Employer's Name and Address			Postal Code
Telephone	Name of Supervisor	Position Held	From (yyyy/mm)	To (yyyy/mm)

Reason for leaving

**ADDITIONAL INFORMATION**

Is there any additional information you would like to bring to our attention?


## CONDITION OF EMPLOYMENT

1. All new employees to Father Lacombe Care Centre are responsible for the cost and provision of a criminal record check.
2. I have made known any physical restrictions that may affect my ability to do the duties of the position(s) I have applied for.
3. I understand that in order to receive recognition for educational qualification, I must provide a copy of my Certificate or valid registration with my licensing body.

I hereby certify that the information and answers given by me in this application are true and complete in every respect. I also understand that:

- any false answers or statements made by me may be grounds for employment termination
- a false statement may disqualify me from employment or result in dismissal
- any offer of employment will be made contingent upon a security clearance and reference check

Applicant's Signature:

Date:

**Father Lacombe Care Centre thanks all applicants for their interest. However, only those selected for an interview will be contacted. Your application will remain on file for 6 months**

This personal information is being collected under the authority for various statutes of the government of Alberta and will be used for the purpose of ensuring the appropriate administration of Father Lacombe Care Centre employee/volunteer policies. The privacy provisions of the Freedom of Information and Protection of Privacy Act protect it. If you have any questions about the collection and/or use of your personal information, please contact FOIPP Coordinator for Father Lacombe Care Centre at 256-4641.