



**HUMAN RESOURCES**  
**Application for Employment**

Thank-you for your interest in our company.

I authorize McAsphalt Industries Ltd. and associated companies to confirm the information listed.

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

**Please Print**

EMPLOYEE NUMBER :	
Name	
Address	
Province	Postal Code
Telephone # (     )	
Social Insurance Number :	
DATE OF BIRTH (YY/MM/DD)	

Are you eligible to work in Canada? /

YES       NO

Position applied for: \_\_\_\_\_

Summer Student             YES             NO

Part-Time Employee         YES             NO

Have you ever been employed by:

Miller paving Ltd. (or associated companies)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
McAsphalt Industries Ltd. (or associated companies)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Brennan Paving & Construction Ltd.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
E.C. King Contracting	<input type="checkbox"/> YES	<input type="checkbox"/> NO

If yes, when was the last time you worked for us?

\_\_\_\_\_

NOTE: If you have worked for us in the past 12 months, complete pages 1 and 3 only.  
If you are a new applicant, please complete pages 1, 2 and 3.

**EDUCATION**

TYPE OF SCHOOL	NAME & ADDRESS OF SCHOOL	FROM	TO	GRADUATED	COURSE/MAJOR
SECONDARY				<input type="checkbox"/> YES <input type="checkbox"/> NO	
POST SECONDARY				<input type="checkbox"/> YES <input type="checkbox"/> NO	
OTHER (SPECIFY)				<input type="checkbox"/> YES <input type="checkbox"/> NO	

**PRIOR WORK HISTORY (List most recent employment first)**

FROM	TO	NAME & ADDRESS OF EMPLOYER	RATE OF PAY	SUPERVISOR'S NAME	REASON FOR LEAVING
DESCRIBE YOUR JOB					
DESCRIBE YOUR JOB					
DESCRIBE YOUR JOB					
DESCRIBE YOUR JOB					

May we contact your current/previous employer/s?  YES  NO

**PERSONAL REFERENCES (List two people – Not relatives or former employers)**

NAME & OCCUPATION	ADDRESS	TELEPHONE #
1.		
2.		

**DRIVER INFORMATION**

Driver's Licence # \_\_\_\_\_

Class \_\_\_\_\_ Expiry date of Current Licence : \_\_\_\_\_

List driving courses or training you have had: \_\_\_\_\_

List safety driving awards you have received: \_\_\_\_\_

**DRIVING EXPERIENCE**

CLASS OF EQUIPMENT	TYPE OF CARGO	FROM	TO	EMPLOYER	CITY & PROVINCE (State)

Has a motor vehicle licence, permit or privilege ever been denied, suspended or revoked?  YES  NO. If yes, please give details : \_\_\_\_\_

## EMPLOYMENT AGREEMENT

1. I have reviewed the company's safety policy and procedures and agree to follow this policy.
2. I will comply with the general safety hazards and safety rules and with specific regulations in any department in which I work.
3. I am aware of my responsibilities under the Ontario or my Provincial Health and Safety Act.
4. I understand that I will be responsible to return to the company on completion of my employment, any safety equipment that I have signed for.
5. I authorize the company to deduct from my paycheque, the value of any safety equipment that I have signed for and do not return, on completion of my employment.
6. I agree to undergo a medical examination if necessary.
7. Notice of Termination and Severance will be determined by Provincial Legislation.

I have read and understood all of the above. I have completed this application as completely and as accurately as possible.

Signature \_\_\_\_\_

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

### PERSONNAL INFORMATION

Spouses Name:

\_\_\_\_\_

Number of dependants and names: \_\_\_\_\_

Summer student only TAX EXEMPT?

YES     NO

If yes, please attach a completed TD1 form.

\_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

NAME \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

PROVINCE \_\_\_\_\_

HOME PHONE \_\_\_\_\_

BUSINESS PHONE \_\_\_\_\_

**TO BE COMPLETED BY SUPERVISOR**

Employee Name:	Start Date:
Job Title	GL Code :
Department	Rate of Pay:
Company Name	
Hired by (Please Print)	
Signature	Shift :                      Roster :
Date signed	

**Each field should be completed prior to submission to Human Resources**

**Explanation**

**What is a Shift :**

- A shift is a span of work that has start and stop times, break times and other defined events; eg :
  - 8 :00 a.m. to 17 :00 p.m.

**What is a Roster :**

- A roster is a repeating or rotating pattern of shifts and days off; eg
  - days on : Monday to Friday
  - days off : Saturday and Sunday

**General Ledger (G/L)**

- A structure that records values and represents assets, liabilities, revenues, expenses and fund balances, e.g;
  - 51010 – Production Wages, Asphalt