

## **PVX PLUS TECHNOLOGIES LTD.**

25 Centurian Drive; Suite 204 Markham, Ontario L3R 5N8 Email: careers@pvxplus.com

## **Application for Employment**

We are an equal opportunity employer and make all employment decisions on the basis of ability and job related qualifications and without regard to race, religion, colour, sex, national origin, age, disability or any other characteristic proscribed under applicable federal, provincial or local law. Please fill in **ALL AREAS** of this application in order to be considered for employment.

DATE OF APPLICATION:  ALTERNATE CHOICE:		POSITION DESIRED:  SALARY DESIRED:			
NAME:					
STREET ADDRESS:					
CITY:	PROVINCE:		POSTAL CODE:		
PHONE NUMBER (AM):	PHONE NUMBER (PM):		REFERRED BY: Advertisement Other		Relative Walk-in yment Agency
Are you lawfully permitted to work in Ca	nada?		Yes	No	
Are you currently employed?			Yes	No	
May we contact your current employer?			Yes	No	Not Applicable
Are you currently on "lay-off" status and subject to recall?  Have you been convicted of a criminal offense for which you have not received a pardon?			Yes	No	
When are you eligible to begin work?		Yes	No		
EDUCATION and TRAINING List educational degrees, programs or co			for the performal	nce of yo	ur job. Include
present enrollments.	Courses of Study	Number of Vendo A	<u> </u>		- 0
NAME OF SCHOOL (CITY & PROV.)	Course of Study	Number of Years A	TTENDED D	EGREES O	R CERTIFICATIONS

## **WORK HISTORY** – to be completed in full (Most recent employer first)

COMPANY NAME:	ADDRESS:	PHONE NUMBER:	SUPERVISOR:			
JOB TITLE:	DATES EMPLOYED:	SALARY:	REASON FOR LEAVING:			
	FROM:	STARTING SALARY:				
	TO:	FINAL SALARY:				
DUTIES/RESPONSIBILITIES:						
COMPANY NAME:	ADDRESS:	PHONE NUMBER:	SUPERVISOR:			
	1					
JOB TITLE:	DATES EMPLOYED:	SALARY:	REASON FOR LEAVING:			
	FROM:	STARTING SALARY:				
	TO:	FINAL SALARY:				
DUTIES/RESPONSIBILITIES:						
COMPANY NAME:	ADDRESS:	PHONE NUMBER:	SUPERVISOR:			
	1					
JOB TITLE:	DATES EMPLOYED:	SALARY:	REASON FOR LEAVING:			
	FROM:	STARTING SALARY:				
	TO:	FINAL SALARY:				
DUTIES/RESPONSIBILITIES:						
PROFESSIONAL REFE	RENCES					
Name	TELEPHONE NUMBER	JOB TITLE	RELATIONSHIP			
		<b>.</b>	1			
SKILLS AND QUALIFIC	CATIONS – Summarize special job-relate	ed skills and qualifications acquired fr	om employment or other experience.			
	PLEASE R	EAD CAREFULLY				
I hereby certify that the facts	set forth in the above employment applicate	tion are true and complete to the best	of my knowledge. I understand that if			
employed, falsified statemen	its on this application shall be considered s	ufficient cause for dismissal.	or my mic mouger i and ordina and mac m			
I authorize PVX Plus to thord	oughly investigate my background, reference	ces, employment record and other ma	atters related to my suitability for			
employment. I authorize persons, schools, my current employer (if applicable), and previous employers and organizations contacted by PVX Plus to provide any relevant information regarding my current and/or previous employment and I release all persons, schools, employers of any and all claims						
of providing such information	1.					
	ation collected on this application is for the phirod by DVX Plus the information collected					
	hired by PVX Plus the information collected ion and use of the information collected on		my employee life. by signing below i			
Oi are t		<del></del>				
Signature		Date				