APPLICATION FOR EMPLOYMENT TOWN OF HANNA COMMUNITY SERVICES DEPARTMENT

Seasonal Parks & Recreation Maintenance

Preference may be given to those who are able to work flexible hours. Shift work, weekends and evenings may be required depending upon facility coverage requirements.

This position requires knowledge of operation and maintenance of small tools and equipment. Duties may include weed control, mowing, trimming, painting, general maintenance and repairs. Facility maintenance may include custodial duties and supervision for major community events. Some weekend and evening shifts may be required.

Successful candidate will enjoy working outdoors, has strong communication skills and can work in a team environment. Should also be self-motivated and have the ability to work independently if required.

For more information, Contact: Gwen Snell, Director of Community Services (403) 854-4433 Email: gsnell@hanna	<u>ca</u>				
Personal Information (Please print clearly					
Name	Telephone # ()				
Last First					
Mailing Address					
Town/City	Province Postal Code				
Email:Cell Ph	one: (<u>)</u>				
Date:	-				
Are you available to work:					
☐ Full-time ☐ Part-time Specify days and hours if par	t-time				
raretime Opeciny days and nodis it par	rumo				
Were you previously employed with us?	_ If yes when?				
If your application is considered favorably on what date will you be available for work?					
, 20_					
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Type of School	Name of School		Location (complete mailing address)	Years Completed	Major & Degree	
High School						
Doct Coopedant						
Post Secondary						
Employment						
Company:		Name	of Supervisor:	Employed Fro	om: To:	
Address:			s Performed: Reason for Leaving			
Phone No. ()						
Company:		Name of Supervisor:		Employed From: To:		
Address:		Dutie	s Performed:	Reason for Le	aving	
Phone No. ()						
Company:		Name	of Supervisor:	Employed Fro	m: To:	
Address:		Dutie	s Performed:	Reason for Leaving		
Phone No. ()						
Personal References (exclude Supervisors listed above and relatives)						
Name		Relati	onship:	Phone No. ()	
Name		Relati	onship:	Phone No. ()	

Education

Have you been cha	rged with a criminal offen	nce? If so, please explain.	
			-
I have not been cha	arged with a criminal offer	nce.	
Date	Signature	Signature of Parent (if under 18 years)	
required to supply	a driver's abstract, cri	ployment with the Town of Hanna, yminal record check or a vulnerables or position with the Town.	
educational institut employment or edu my personal inform- institutions listed ab am hired, for the pu as my potential en purposes or as pe	ions listed above to giucation. I understand that ation on this form and from the cove to determine my suit urpose of our employment and disermitted or required by disclosure by you, as my	ct. I authorize the references, superive you any information concerning the you, as my potential employer at you, as my potential employer at the references, supervisors and tability for the position I have applied to the relationship. I understand and agreed sclose my personal information on law. By signing this form, I controlly potential employer, of my personal	ng my prior re collecting educational d for and, if I ree that you, ly for those isent to the
Date		Signature of Applicant	

~ Please attach any additional information you feel may be helpful in our selection. ~