



External Application for Employment Opportunities

Competition Number:

Please Note: Applications for employment must be for a current competition.

Part I: Personal Information (please print)

First Name:	Middle Name:	Last Name:
Street:		City:
Province:		Postal Code:
Phone () Number:	Alternate Phone () Number:	E-Mail Address:

Are you legally entitled to work in Canada?

Yes _____ No _____

- Volunteers need not answer.
- You are legally entitled if you are a Canadian citizen, permanent resident/landed immigrant or hold a work permit.

Have you ever been employed by or volunteered for the Halifax Regional Library?

Yes _____ No _____

If yes,

Branch/Dept: _____ Dates - From: _____ To: _____

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Branch/Dept: _____ Dates - From: _____ To: _____

Do you have an immediate family member who is currently an HRL Board Member or Manager?

Yes _____ No _____

- If "yes," you are not permitted to work at the Halifax Public Libraries under HRL's Nepotism policy.
- "Immediate Family" is defined as spouse, parents, siblings, grandparents and grandchildren. All of these relationships shall be considered to have their broadest interpretation (eg. In-law, common-law, same-sex common law, adoptive and step relations are included. "Immediate Family" also includes an relatives living together.

Note: You may refer to an attached resume for Part II, III, IV and V

Part II: Employment History

A. Present or Most Recent Employer

Employer Name:	Reason For Leaving:
Type of Business:	Position Held:
Period of Employment - From:	To:
Address of Employer:	
Supervisor's Name:	Phone Number:
Describe main duties and responsibilities:	

B. Previous Employers

Employer Name:	Reason For Leaving:
Type of Business:	Position Held:
Period of Employment - From:	To:
Address of Employer:	
Supervisor's Name:	Phone Number:
Describe main duties and responsibilities:	

Employer Name:	Reason For Leaving:
Type of Business:	Position Held:
Period of Employment - From:	To:
Address of Employer:	
Supervisor's Name:	Phone Number:
Describe main duties and responsibilities:	

Employer Name:	Reason For Leaving:
Type of Business:	Position Held:
Period of Employment - From: _____ To: _____	
Address of Employer:	
Supervisor's Name:	Phone Number:
Describe main duties and responsibilities:	

Part III: Education

Level of Education	Degree/Diploma in Progress	Degree/Diploma Completed	Area of Specialization	# of years Successfully Completed
Secondary				
Post-Secondary				
Post-Graduate				
Other (Night School, Correspondence, Trade School, Vocational, etc.)				

Part IV: Acquired Skills

Keyboarding:	Word Processing:	PC Software: (specify)
Tools and equipment: (specify:		
Other:		

Part IV: Other Relevant Practical Skills Not Mentioned Previously

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Part IV: Conditions of Employment

- I understand that if the position I am offered falls within a bargaining unit, membership is compulsory and union dues will be deducted. If employed, I agree to comply with the terms and conditions of employment as outlined in the appropriate collective agreement and/or the Human Resources policies and employment practices of the Halifax Regional Library.
- I understand that I will be required to show proof of the validity of my driver's license and/or professional Licenses, when such certification constitutes a job requirement.
- I understand that the operating hours of the Halifax Regional Library system vary and may include Saturday, Sunday, evening and standby scheduling, depending upon location and position.
- I agree to provide information identifying present and/or past employers to be approached for references. I understand that such references will be sought only after an interview. I authorize the Halifax Regional Library to make such inquiries and as deemed appropriate to the position for which I am applying.
- **I agree that I will obtain a Police Record Check should I be so requested in furtherance of this application.**
- Should I require a criminal records check I will provide the Halifax Regional Police or RCMP with personal information such as current and past addresses, previously used names and date and place of birth.
- I understand that the information the Halifax Regional Library receives from criminal records checks will be used only for the purpose of screening applications for this position and any HRL positions I might apply for in the future
- I understand misrepresentation made on this application, or on other documentation and/or tests related to employment will be sufficient cause for cancellation of my application and, if employed, for dismissal from the Halifax Regional Library.

Are you attaching additional information?	Yes _____	No _____
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Applicant's Signature

Date (d/m/y)