



**BIRNAM**

**APPLICATION FOR EMPLOYMENT-  
OFFICE & MANAGEMENT**

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

**POSITION APPLIED FOR:** \_\_\_\_\_

**GENERAL INFORMATION:**

Name: \_\_\_\_\_  
(Last) (First) (Middle Initial)

Address: \_\_\_\_\_  
(No.) (Street) (P.O. Box) (Apt. No.)  
\_\_\_\_\_  
(City) Province (Postal Code)

Home Telephone No.: \_\_\_\_\_ Cell No.: \_\_\_\_\_

Best time to contact: \_\_\_\_\_ at Home Number or Cell Number (Please circle)

E-mail Address: \_\_\_\_\_

How did you learn about this opportunity? \_\_\_\_\_

Are you legally eligible to work in Ontario and at least eighteen years of age? Yes No

Social Insurance Number (Optional): \_\_\_\_\_

Date you are available to start work: \_\_\_\_\_

What are your wage/salary expectations? \_\_\_\_\_ Hourly or Yearly (Please circle)

Are you aware of anything that may limit your ability to work for Birnam Excavating Ltd.? If yes, please describe. Yes No

Examples may include: outside activities or relationships that would cause a conflict of interest, or non-compete/non solicitation agreements, contracts, clauses, etc. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you or any member of your family worked for Birnam Excavating Ltd. before? Yes No

If yes, please provide details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime relating to this job? Yes No

If yes, please provide details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** It is illegal to refuse employment unless the circumstances of the conviction substantially relate to the job. A conviction does not disqualify you from employment with Birnam Excavating Ltd.

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**EMPLOYMENT HISTORY:**

Present/Previous Employer: \_\_\_\_\_

Nature of Present/Previous Employer's Business: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

General Duties (tasks you completed on a day-to-day basis): \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Achievements: (size & scope of projects, awards, etc.): \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Leaving Salary/Wages: \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Nature of Present/Previous Employer's Business: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

General Duties (tasks you completed on a day-to-day basis): \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Achievements: (size & scope of projects, awards, etc.): \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Leaving Salary/Wages: \_\_\_\_\_

**REFERENCES:** I give permission to contact my previous employer[s]. Yes No

I give permission to contact my current employer[s]. Yes No

Additional Character References: *(You may attach further references with your Résumé.)*

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Occupation \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Occupation \_\_\_\_\_

Relationship \_\_\_\_\_

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**EDUCATION:**

What is the Highest Level of Education that you have Attained? \_\_\_\_\_

Grade/Level

Name of School

Field[s] of Study

G.P.A

Year Completed

Please summarize your education experience - what courses you took, special achievements, etc. \_\_\_\_\_

**ADDITIONAL EDUCATION & TRAINING:**

Course Taken

Year Completed

First Aid/CPR \_\_\_\_\_

WHMIS \_\_\_\_\_

Computer Courses \_\_\_\_\_

Gold Seal Courses \_\_\_\_\_

Health & Safety Training \_\_\_\_\_

Please discuss any other Education/Training you have completed: \_\_\_\_\_

**SKILLS:**

Do you have reliable means of transportation and a valid driving license?

Yes

No

Driver's License # \_\_\_\_\_

License Class: \_\_\_\_\_

Do you have any experience with Office equipment and tools?

Yes

No

If yes, please provide details.

"Office equipment" refers to: Photocopiers, Fax machines, Scanners, Multi-line Telephones, Various Technologies and other common Office hardware.

Do you have any computer experience in the following? (Please check all that apply)

Microsoft Outlook (or similar e-mail)

Microsoft Office (Word, Excel, Power Point)

Microsoft Windows XP

Accounting Software

Estimating Software

HR Software/HRIS

Project Management Software

Other Software

Please list/name the computer programs that you are familiar with that are relevant to this position.

Do you have any experience in the following? (Please check all that apply and supply length of time)

Project Management \_\_\_\_\_

Estimating \_\_\_\_\_

Accounts Receivable \_\_\_\_\_

Accounts Payable \_\_\_\_\_

Foreman \_\_\_\_\_

Human Resources \_\_\_\_\_

Payroll \_\_\_\_\_

Health & Safety \_\_\_\_\_

Management \_\_\_\_\_

Field Experience \_\_\_\_\_

Please provide details or list other: \_\_\_\_\_

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**MISCELLANEOUS:**

Please provide details for the following:

Please list previously completed projects under your control and what size they where?

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How many projects have you managed at the same time?

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How many staff where under your control?

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Do you have any field experience in the construction industry? Yes  No

If yes, please provide details: \_\_\_\_\_

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Have you ever been discharged or asked to resign from a position? Yes  No

If yes, please provide details: \_\_\_\_\_

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Do you have any health concerns that would prevent you from completing your work safely and on a full-time basis? Yes  No

If yes, please provide details: \_\_\_\_\_

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**OTHER COMMENTS:**

(Please feel free to comment on other skills or knowledge)

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**AUTHORIZATION:**

I authorize investigation of all statements contained in this application and I hereby certify, that, to the best of my knowledge and belief, the answers given by me and the statements made are correct. I understand that any false information, misrepresentation, or consequential omissions are cause for rejection of this application or dismissal if employed. I understand that I have the right to refuse to answer any question that may, in my opinion, infringe on my human rights.

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