

## **APPLICATION for SUMMER EMPLOYMENT**

Please indicate with which company within Paper Excellence you are applying:

#95 - 10551 Shellbridge Way Richmond, BC V6X 2W8 email: hr@paperexcellence.com	Meadow Lake Mechanical Pulp Inc.  PO Box 9100 Meadow Lake, SK S9X 1V7 email: info@meadowlakepulp.com
Prince Albert Pulp Inc.  PO Box 3001 Prince Albert, SK S6V 5T5 email: jobposting@papulp.com	Howe Sound Pulp & Paper Corp.  3838 Port Mellon HWY Port Mellon, BC VON 2SO email: employment_coordinator@hspp.ca
Mackenzie Pulp Mill Inc.  PO Box 2609  Mackenzie, BC VOJ 2C0  email: hrmack_recruiting@mackenziepulp.co	Northern Pulp Nova Scotia Corp.  PO Box 549, Station Main New Glasgow, NS B2H 5E8 email: northernpulpresumes@northernpulp.com
PERSONAL IN	IFORMATION
Name: Last	First
Position being applied for:	
Available Start Date:	End Date:
Current Address:  Street/Box Number  Province	City Postal Code
Cell Phone Number:	Home Phone Number:
Email Address:	
Do you have a valid driver's license? Yes	No
Are you willing to work shifts? (can include evenings, weeken	ds & holidays) Yes No
Have you ever worked for Paper Excellence before?	Yes No
Area of Mill worked:	Dates employed:

## **EDUCATION & TRAINING**

Seconda	ary (	(The following b	ox must be	completed.	)					
High	Name of Grade to be complete in June of Current Year		· ·	Year Will/Did Graduate			Major Courses			
School										
* NOTE	: To be	e eligible for summ		-		_		-	vide the nam	es of the
	ı	In	stitutes you ha	ı						
If graduating		Name of School	Length of Program	Year of Graduation		Name of Degree/Diploma		Major Courses		
from High So this year, institutio applied to, y program, e	list ns what									
Post Sec	cond	lary								
		Name of High School, Colleges, Universities, Special Programs and Their Location		Dat	Ι Δ		oma/ Earned	Graduation Date	University/ College	
		and men L	ocation	From	То	Yes	No		Minor	Major
Vocationa	al									
College o Universit										
Business of Corresponde										
Other Train	ing									
		l education, ce <b>kills:</b> (list prog						•		c.)
Account	ing	Skills:								
Trade SI	kills,	Other:								

## **EMPLOYMENT RECORD**

Please list all employment starting with the most recent/current employer. Provide separate pages if additional space is required.

1.	Last Position	n Held				
Name of Firm		Name of Supervisor				
Address		Contact Phone Number				
May we contact this employer? Yes	No	Employed from:	to _			
Description of Duties:						
Reason for Leaving:						
2 .						
	Last Positio	on Held				
Name of Firm		Name of Supervisor				
Address		Contact Phone Number				
May we contact this employer? Yes	No	Employed from:	to			
Reason for Leaving:						
3.	Last Positio	on Held				
Name of Firm		Name of Supervisor				
Address		Contact Phone Number				
May we contact this employer? Yes	No					
— Description of Duties:						
Reason for Leaving:						

GOALS & INTERESTS
What extra curricular activities have you been involved in?
What do you enjoy doing in your spare time?
Describe the kind of work desired and your career ambitions.
ADDITIONAL INCODMATION/COMMENTS
ADDITIONAL INFORMATION/COMMENTS
How can Paper Excellence best utilize your training and experience?

## **Work-Related References** Name: Name: Company: Company: Address: Address: Telephone: Telephone: Position: Position: I certify that the information shown on this application and in other documents I have referred to is true. I understand that any falsification, misrepresentation or withholding of relevant information will be cause for denial of employment or immediate termination when discovered after employment. In connection with my application form, and any subsequent employment with Paper Excellence, I hereby authorize any person, organization, reference, agency (which may include credit bureaus, law enforcement agencies, driver licensing bureaus and educational institutions where permitted by law) to supply Paper Excellence or its agent(s) as its duly authorized representatives, any job-related information that Paper Excellence deems relevant to my qualifications for employment and is used by Paper Excellence in accordance with law. I release Paper Excellence and its officers, directors and agents from any and all liability, responsibility, damages and claims of any kind whatsoever arising from inquiries. I acknowledge that I am aware should Paper Excellence choose to implement a drug testing policy my employment may be terminated if I am impaired by drugs or alcohol while at work. I understand that any offer of employment may be subject to me completing a medical history form and taking a physical examination which may include drug testing. By signing this form, I agree with the above statements and allow Paper Excellence to complete credential checks, unless otherwise stated previously in this form. Χ

Applicant's Signature

Date Signed