



Vanell Nursing & Home Care Inc.,
www.vanellhealthcare.com
EMPLOYMENT APPLICATION

POSITION APPLY FOR (PLEASE CIRCLE)				
Registered Nurse (RN); Registered Practical Nurse (RPN); Personal Support Worker (PSW)				
SHIFT AVAILABLE (Circle): DAYS EVENING NIGHTS WEEKENDS				
Are you willing to travel: Yes No			Date Available:	
PERSONAL INFORMATION				
Name (Last):		First:		Middle:
Address (Street):				
City:		Province:		Postal Code:
Phone No:			Email:	
Are you legally eligible to work in Canada: Yes No			Social Insurance Number will be added if hired	
Employment History				
Present or Last Employer:			From:	To:
Address:				
Position		Supervisors' Name:		Supervisor's Position:
Duties:				
Reason for leaving:				
May we contact the employer? Yes No			Supervisor's phone number:	
Previous Employer:			From:	To:
Address:				
Position		Supervisors' Name:		Supervisor's Position:
Duties:				
Reason for leaving:				
May we contact the employer? Yes No			Supervisor's phone number:	
Previous Employer:			From:	To:
Address:				
Position		Supervisors' Name:		Supervisor's Position:
Duties:				
Reason for leaving:				
May we contact the employer? Yes No			Supervisor's phone number:	
Education				
	Name/Address	Course/Program	Certificate/Diploma/Degree	Dates
Secondary				
College				
University				
Others				
References				
Give names of two persons not related to you				
Name	Phone Number	Occupation	Address	
APPLICANT'S DECLARATION				
<p>1) I declare that the statement made by me in this application are to the best of my knowledge. I realize that any false statement made deliberately may disqualify me from employment and will be grounds for dismissal. I also understand that if hired, I must successfully complete a probationary period.</p> <p>2) Obtain and provide Vanell Nursing Home Care Inc. with a current security clearance and any cost relating to getting the security clearance will be paid by me.</p> <p>3) I understand that the content of the security check will be kept in confidence in Human Resources Department and will only be disclose to the Hiring Manager.</p> <p>4) To protect the health of our residents, all employee are required to have an annual flu immunization.</p>				
Signature _____			Date _____	