

HOLLAND INDUSTRY – JOB APPLICATION FORM

573 FENMAR DRIVE., TORONTO, ON, M9L 2R6

TEL: (416) 736-1732

DATE: _____

PERSONAL INFORMATION:

NAME	SURNAME	INITIAL
DATE OF BIRTH	SOCIAL INSURANCE #	DRIVER'S LICENSE #
HOME PHONE #	CELL PHONE #	OTHER PHONE #

SETTLEMENT INFORMATION:

CURRENT ADDRESS:		
CITY	PROVINCE	POSTAL CODE

PREVIOUS EMPLOYMENT:

OCCUPATION	COMPANY NAME	SALARY
EMPLOYER NAME (FIRST & LAST)	EMPLOYER CONTACT #	DURATION OF EMPLOYMENT

FINANCIAL INFORMATION:

NAME OF BANKING INSTITUTION	BRANCH LOCATION	CONTACT #
ACCOUNT #		

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VEHICLE INFORMATION:

MAKE	MODEL	YEAR
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REFERENCE INFORMATION:

NAME OF REFERENCE	RELATIONSHIP	CONTACT #
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Declaration of Agreement:

I clarify that the information provided on this application is correct and I understand that any misrepresentation or omission of any information will result in disqualification from consideration for employment of if employment for just cause. Holland Industry Inc. may verify my the information set forth on this application and obtain additional background information relating to my background. I authorize all persons, schools, companies, corporations, credit bureaus, law enforcement agencies and doctor to supply all information concerning my background.

On the first day of employment I agree to provide Holland Industry Inc. proof of my age, Social Insurance Number and appropriate credentials as may be required.

I understand that the first 3 months of active service will be probationary during which time my employment may be terminated without notice of termination of employment or pay in lieu thereof.

By signing the HOLLAND INDUSTRY - JOB APPLICATION FORM, I agree to comply with terms and conditions above.

Date of Submission: _____

Signature of Applicant: _____