



**Glacier View Lodge**  
 Non-profit Residential Care Facility  
 2450 Back Road, Courtenay, BC, V9N 8B5  
 Tel: 250-338-1451 – Fax: 250-338-1115



APPLICATION FORM FOR EMPLOYMENT				
DATE:				
NAME:				
Last		First		Middle
ADDRESS (including postal code):				
HOME PHONE:			CELL PHONE:	
SOCIAL INSURANCE NUMBER:			DATE OF BIRTH:	
POSITION APPLIED FOR:				
WOULD YOU WORK:	FULL TIME:	PART TIME:	CASUAL:	
HAVE YOU BEEN PREVIOUSLY EMPLOYED BY US? IF YES, PROVIDE DATE:				
DO YOU HAVE FRIENDS OR RELATIVES WHO WORK AT GLACIER VIEW LODGE? If yes please list below				
Name:			Relationship:	
Name:			Relationship:	
Emergency Contact Information				
Name:			Relationship:	
Home:	Work:	Cell:		
References: (include at least two employers' references if possible, and two personal references)				
Name and Occupation:			Phone Number:	
Name and Occupation:			Phone Number:	
Name and Occupation:			Phone Number:	
Name and Occupation:			Phone Number:	
Permission to contact References listed above: SIGNATURE:				
Please attach an up to date RESUME.				
If you do not have one available, please provide the following information:				
EDUCATION:				
Name of School	Course of study	Years attended	Did you graduate?	List Diploma or Degree
High School:				
University:				
Other (Specify):				

<b>Employment:</b> (List below, starting with your most recent, all present and past employment):				
Name & address of employer & type of business:	From – To	Detailed description of your work:	Name of Supervisor	Reason for leaving

The facts provided above in my application for employment are true and complete. I understand that if employed, false statements on this application will be considered cause for dismissal.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**Return application form and your resume in person to Glacier View Lodge  
 2450 Back Rd., Courtenay, B.C.  
 Reception Office Open Monday – Friday from 0900 – 1530 hrs.**