Part-Time Employment Application



Email the completed application form & supporting documents to recjobs@vaughan.ca OR drop-off to any Vaughan community centre or City Hall (attention: Recreation Services). For more information & job postings, visit vaughan.ca/RecJobs.

We thank all applicants. Only those selected for an interview will be contacted. Print clearly and answer all questions. Resumés strongly recommended. Upon receiving advance notification, accommodation will be provided in all aspects of the hiring process as required under the City of Vaughan's Accessibility Policy.

First Name: Last Name:							
Full Addr	ess:						
Main Phone #:		Other Phone #:					
Email Ado	dress:						
	No 🗌	Are you legally eligible to work in Canada?					
	No 🗌	Will you be a minimum of 16 years of age for the duration of the program?					
	Vo ∐	Do you have a valid Social Insurance Number?					
Yes N	No 🗌	Do you have your current Standard First Aid & CPR-C certification? If yes, Expiry Date:		At	tach pl	hotocopy.	
			MMM-YYYY				
Yes N	No L	Do you have your current Police Vulnerable Sector Check? If yes, Issue Date:	MMM-YYYY	Att	tach pł	hotocopy.	
	. \Box						
	No 🗌	Are you presently employed in any other position by the City of Vaughan? If yes, position					
Yes N	No L	Have you been employed in the past by the City of Vaughan? If yes, position and location	on:				
Position	n Apply	ring For: Program Applying To:	Preferred Locati	ons:			
1 0311101	тирріј	riogram Applying to.	Treferred Edeati	J113.			
Educatio	n: High	est Grade Completed: School:					
Employm	nent H	istory: List any volunteer or paid positions you've held related to the position you are ap	plying for. Begin v	vith the most r	recent.		
Employed by	r	Position:	Employed from		to		
inployed by	y.	rosition.	Linployed from	MMM-YYYY		MMM-YYYY	
Employed by	<i>/</i> -	Position:	Employed from		to		
imployed by	y ·	rositori.	Employed from	MMM-YYYY		MMM-YYYY	
Qualifica	tions:	List all qualifications/certificates related to the position applying for. Attach photocopies.					
Qualification	os/Cartifi	rator		Expiry Date:			
Qualification	13/ ССТ (111)	cotcs.		Expiry Date.	N	1MM-YYYY	
Qualification	ns/Certific	rates:		Expiry Date:			
Qualification	13/ ССТ (111)	cotcs.		Expiry Date.	N	1MM-YYYY	
Other rel	lated i	nterests or skills:					
		above information is complete and accurate to the best of my knowledge and I authorize the					
	-	in the processing of my application for employment. A vulnerable sector check is a requirer en and/or vulnerable adults. It is understood and agreed any misrepresentation made by me				-	
ause for cancellation of the application or, if I have been employed, cause for separation.							

Personal information on this form is collected pursuant to the Municipal Act, 2001, S.O. 2001 c.25, as amended and will be used for the purpose of determining eligibility for employment with the Corporation of the City of Vaughan. Questions about this collection should be directed to the Director of Recreation Services, City of Vaughan, 2141 Major Mackenzie Drive, Vaughan, Ontario, L6A 1T1, 905.832.8500.

Signature:	Date: