

Employment Application Form

(This form is to accompany a resume and cover letter.)

The University of Toronto is strongly committed to diversity within its community and especially welcomes applications from racialized persons, women, Indigenous / Aboriginal people, persons with disabilities, LGBTQ persons, and others who may contribute to the further diversification of ideas.

PERSONAL INFORMATION

Name : _____ <i>(Given name first, family name second)</i>	Email address: _____
Phone number Home: _____	Business: _____

GENERAL INFORMATION

Position Applied for:	
Position Title: _____	Department: _____
Job Opportunity No.: _____	
Are you age 18 or older?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you legally entitled to work in Canada?	Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>(If the University makes a conditional offer of employment, you may be asked to provide proof of your legal entitlement to work in Canada.)</i>	
Employment at the University of Toronto:	
Current Employee: Yes <input type="checkbox"/> No <input type="checkbox"/>	Previously employed: Yes <input type="checkbox"/> No <input type="checkbox"/>
<i>If currently or previously employed by the University of Toronto (including UTEMP), you must complete the following:</i>	
Department: _____	Reason Left: _____
Date Left: _____	Personnel No. (if known): _____ Candidate ID (if known): _____
<i>If not currently employed by the University of Toronto, please complete the following:</i>	
Have you ever been convicted of a criminal offence for which a pardon has not been granted? Yes <input type="checkbox"/> No <input type="checkbox"/>	
What date are you available to start work? _____	

WORK-RELATED REFERENCES

Please provide three employment related references, including your current supervisor. In addition to the references provided by the applicant, the University reserves the right to contact others who it deems relevant and appropriate in the assessment of this application.		
Name and Title	Employment Relationship	Company and Phone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

All information provided in this form, my resume and cover letter, and information presented during the interview process is truthful to the best of my knowledge. I understand that falsification of any of this information or omission of any pertinent information may disqualify me from employment and/or will constitute grounds for dismissal. If employed, I agree to undergo medical examinations that may be required, which are relevant to the position for which I have applied, including medical examinations that may be required in accordance with University benefit plan requirements.		
Date: _____	Signature: _____	
	Print Name: _____	