

Victoria the Islands and Yukon Division
ISO 9001:2000 -- Quality Procedure Manual

Date: _____

Corps No: _____

CANADIAN CORPS OF COMMISSIONAIRES
Victoria, the Islands and Yukon Division

APPLICATION FORM

Instructions: Complete all sections as thoroughly as possible. On enrolment, this information will be entered into the Division's employment database. The information contained herein is Confidential and is for the exclusive use of the Canadian Corps of Commissionaires.

Please type or print in block letters (ink only)

PERSONAL INFORMATION

Last Name: _____ Given Names: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: (home) _____ (business) _____ (fax) _____

Do you meet the residency requirements to hold a security guard licence in British Columbia: Yes / No
(Must be ordinarily resident in Canada)

Are you old enough to hold a security guard licence in British Columbia? Yes / No
(Must be at least 19 year of age)

Do you own a car (Yes/No): _____ List Drivers Licence No. and Class: _____

List any Drivers Licence Restrictions: _____

Are you willing to have your photograph and fingerprints taken for record purposes (Yes/No)? _____

Are you willing to be searched when going on or off duty (Yes/No)? _____

Have you ever been convicted of a Criminal Offence for which you have not been pardoned (Yes/No)? _____

If so, state offence(s) _____ Date of Offence(s) _____

Place of Offence _____ Disposition of Offence _____

Are you seeking full or part time work? _____ Date available for work: _____

PREVIOUS MILITARY / RCMP SERVICE

Highest Former Military / RCMP Service Rank: _____ Total Years Service: _____

From _____ to _____ If Military - Regular _____ Reserve _____

Canadian Forces or _____

Unit and Location on Release _____

Occupation (Military Occupation Code (MOC) and Title) _____

Medals/Decorations: _____

Languages: English fluent _____ functional _____ limited _____

French fluent _____ functional _____ limited _____

Other _____ fluent _____ functional _____ limited _____

MILITARY / RCMP OCCUPATIONAL INFORMATION

Military Occupation Code (MOC) / Specialty

When last did you use your MOC/Specialty skills and/or receive training in that field? Explain.

Are you willing to continue to work within your MOC/Specialty? Yes _____ No _____

PREVIOUS COMMISSIONAIRE / RCMP GUARD EXPERIENCE

Highest Previous Commissionaire Rank: _____ Total Years Service: _____

from _____ to _____ Division: _____ Appointment: _____

from _____ to _____ Division: _____ Appointment: _____

SECURITY CLEARANCE (If Expired, please include and indicate "EXPIRED")

Level: _____ Date Last Held: _____ Location: _____

First Aid (If Expired, please include and indicate "EXPIRED")

Level: _____ Date: _____

EDUCATION AND TRAINING

Education

Grade: _____ Province: _____

Post Secondary

| Institution | Location | Degree/Diploma/ Certificate | Specialization | Complete |
|-------------|----------|--------------------------------|----------------|----------|
| | | | | Y/N |
| | | | | |
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Training & Qualifications

| Course/Qualification/Licence | Institution | Duration of Course | Complete |
|------------------------------|-------------|-----------------------|----------|
| | | | Y/N |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Work Experience

| Employer | Location | Position Held | Dates | | No. of Pers Supervised |
|----------|----------|---------------|-------|----|---------------------------|
| | | | From | To | |
| | | | | | |
| | | | | | |
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Instructional Experience

| Training | Course Taught | Location | Duration | Year |
|----------|---------------|----------|----------|------|
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Professional Affiliations / Associations

Computer Skills

Do you own / use a computer at your place of residence? Yes _____ No _____

Are you on the Internet? Yes _____ No _____

If yes, list your email address: _____

Specify skills / experience as Limited (L) Intermediate (I) Advanced (A)

Word processing _____ spreadsheets _____ desktop publishing _____

Programming _____ (specify) _____

Systems maintenance _____ (specify) _____

HOBBIES / ACHIEVEMENTS

Briefly summarize any knowledge, and major skills/achievements which have not yet been documented on this form. Include significant activities/hobbies.

Given two references as to character (local and recent) who could be contacted and provide information on your character, work record and performance.

(Name) (Address) (Telephone)

(Name) (Address) (Telephone)

How did the Commissionaires come to your attention:

Yellow pages Newspaper Previous contact Web site Other _____

I certify that, to the best of my knowledge, the information provided in this questionnaire is true and accurate.

Signature: _____ Date: _____

Name (Print): _____