



### Applicant information

Full Name: \_\_\_\_\_

Address (include box # if applicable and postal code) : \_\_\_\_\_

\_\_\_\_\_

Daytime Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Date Available: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Are you a Canadian Citizen: YES NO

If no, do you have a valid work permit: YES NO (a copy will be required prior to being hired)

Have you ever worked for Aubin Nurseries: YES NO If yes, When: \_\_\_\_\_

### Education

High School: \_\_\_\_\_

Highest Grade Achieved: \_\_\_\_\_ Date: \_\_\_\_\_

Post Secondary: \_\_\_\_\_

Program name: \_\_\_\_\_ Date: \_\_\_\_\_

Post Secondary: \_\_\_\_\_

Program name: \_\_\_\_\_ Date: \_\_\_\_\_

### Previous Employment

Company: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates: \_\_\_\_\_

Description of Work: \_\_\_\_\_

\_\_\_\_\_

Company: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates: \_\_\_\_\_

Description of Work: \_\_\_\_\_

\_\_\_\_\_

Company: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates: \_\_\_\_\_

Description of Work: \_\_\_\_\_

\_\_\_\_\_

**References**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company/Title: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company/Title: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company/Title: \_\_\_\_\_

**Other Information:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Completed applications can be dropped off at the office Monday-Friday, 8am to 5pm.

22101 Hwy 3, Carman, MB R0G 0J0 (mailing: PO Box 1089, Carman, MB R0G 0J0)

Phone: 204-745-6703

Email Application and/or resume to [kristina@aubinnurseries.ca](mailto:kristina@aubinnurseries.ca)

Fax Application to 1-204-745-6838