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NORTHWEST PROTECTION SERVICES Ltd.

APPLICATION FOR EMPLOYMENT
(Licensed Applicants)

1951 Eglinton Ave W Suite 201
Toronto, ON M6E 2J7
Phone: (416) 787-1448
Fax: (416) 256-2062

Last Name	First Name and Middle Initial(s)			
Street Address				
City/Municipality	Province: ON	Postal Code	Residential Phone No.	Cell Phone No.
Email			Hiring Location: TORONTO	Hourly Rate Expected *

Are you legally eligible to work in Canada?	Yes ☒	No ☐
Have you ever worked for this company?	Yes ☐	No ☐
Do you own or have the use of a vehicle?	Yes ☐	No ☐

How did you know about working with us?

INDEED

Details about this referral (fill it only for REFERRAL PROGRAM & OTHER)

License No.	Expiry Date (dd/mm/yyyy)	Smart Serve Certificate No. *

What special training do you have which would be an asset to Northwest Protection? *

☐ FA ☐ CPR ☐ UOF ☐ CRC ☐ AAA

Enter any other skill / training

I acknowledge that the foregoing statements and information fully and truthfully set forth true and accurate personal information as of the date hereof. I further acknowledge that for the purposes of determining my suitability for the position applied for, an investigation may be made with respect to relevant information. I hereby consent to Northwest Protection Services Ltd., or its affiliates or agents collecting and retaining such information and conducting further investigations with respect to relevant information. I further consent to the updating of this information from time to time, as necessary.

By marking this box with an ñXò I confirm that I am the person identified in the Application and that I agree to all of the above. ☐

Electronic Signature

Date (dd/mm/yyyy)