

Employment Application



Complete all of following information.

Legal Name	Middle Name(s)	Last Name
Preferred Name	Date of Birth (MM/DD/YYYY)	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary

Are you a Canadian Citizen or Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you eligible to work in Canada? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a valid Serving It Right? <input type="checkbox"/> Yes <input type="checkbox"/> Willing to Obtain
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City of Residence	Contact Number	Email Address
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Availability

Under each day of the week you can work, list a timeframe in which you are available to be regularly scheduled. Scheduling hours at Liquor For Less.com are typically between 8:30am-11:15pm. In the box below, include any known time off needed within the next 3 months.

SUN	MON	TUE	WED	THU	FRI	SAT

Upcoming Time Off & Additional Scheduling Information

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Preferred hours per week (max. 40): _____	Date Available to Start if Hired: _____
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Select YES for each Liquor For Less.com location you would like your application to be considered for. Select PREFERRED for your ideal location(s).

LFL-1 Highstreet: M115-3122 Mt. Lehman Rd. Abbotsford, BC	<input type="checkbox"/> YES <input type="checkbox"/> PREFERRED
LFL-2 Riverside: 1-34252 Marshall Rd. Abbotsford, BC	<input type="checkbox"/> YES <input type="checkbox"/> PREFERRED
LFL-3 Glenn Mountain: 102-2618 McMillan Rd. Abbotsford, BC	<input type="checkbox"/> YES <input type="checkbox"/> PREFERRED
LFL-4 Ellwood: 1-31205 Maclure Rd. Abbotsford, BC	<input type="checkbox"/> YES <input type="checkbox"/> PREFERRED
LFL-5 216 & Fraser: 100-21615 Fraser Hwy. Langley, BC	<input type="checkbox"/> YES <input type="checkbox"/> PREFERRED
LFL-6 McCallum (Characters): 2509 Pauline St. Abbotsford, BC	<input type="checkbox"/> YES <input type="checkbox"/> PREFERRED

Declaration

Please review, acknowledge and sign. Submit your completed application to one of our employees.

I declare that the information contained in this application is correct to the best of my knowledge.	<input type="checkbox"/> YES <input type="checkbox"/> NO
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Legal Name (printed)	Signature	Date (MM/DD/YYYY)
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Employer Section

This section is to be filled out by the manager or shift leader on duty. Please review, sign and submit with applicant's resume to your hiring manager.

Shift Leader Name	Location	Date (MM/DD/YYYY)
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Select YES once application and resume has been forwarded to the Recruitment Manager.	<input type="checkbox"/> YES
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