

**TSILHQOT'IN NATIONAL GOVERNMENT  
FISHERIES DEPARTMENT EMPLOYMENT APPLICATION**

**Please complete all sections as thoroughly as possible, even if you are attaching a resume.  
All information provided to us would be considered confidential in the hiring process.  
DO NOT LEAVE ANY BLANK SPACES OR IT WILL NOT BE ACCEPTED.**

**Personal Information:      Applying For Catch Monitor**

DOB: \_\_\_\_\_ Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Band & Number: \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_ Drivers License Number: \_\_\_\_\_

Do you own a vehicle? \_\_\_\_\_

Any Disabilities? Yes \_\_\_ no \_\_\_ if yes, please describe: \_\_\_\_\_

\_\_\_\_\_

**Education and Training:**

Grade completed: \_\_\_\_\_ Year \_\_\_\_\_ Name of Highest Level of Education: \_\_\_\_\_

\_\_\_\_\_

Other Training: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Special Skills and Achievements:**

Computer Knowledge: yes \_\_\_ no \_\_\_ If yes, what computers/applications? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Any other experience or trades related to working with Fisheries?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Work History of Employer and Location:**

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

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

From: \_\_\_\_\_ To: \_\_\_\_\_ Phone: \_\_\_\_\_

Reasons for Leaving: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Duties and Skills: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Continue Employer and Location:**

Company: \_\_\_\_\_ Location: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Phone: \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Duties and Skills: \_\_\_\_\_  
\_\_\_\_\_

Company: \_\_\_\_\_ Location: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Phone: \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Duties and Skills: \_\_\_\_\_  
\_\_\_\_\_

Company: \_\_\_\_\_ Location: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Phone: \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_  
Supervisor: \_\_\_\_\_  
Duties and Skills: \_\_\_\_\_  
\_\_\_\_\_

**References: Do you wish to be consulted prior to our conducting a reference check with your past or present employer?**

Past: yes \_\_\_\_\_ no \_\_\_\_\_ Present: yes \_\_\_\_\_ no \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**I certify that the information in this application or attachments/resumes is true and complete. I understand that a false statement will disqualify me for employment or will cause my dismissal. Please read carefully before signing. This application is not valid unless signed by the applicant.**

\_\_\_\_\_  
**Signature of Applicant** \_\_\_\_\_  
**Date**