



NATIONAL MONEY MART COMPANY

APPLICATION FOR EMPLOYMENT (form current as of January 1, 2009)

To the Applicant: Money Mart appreciates your interest in our Company, and assures you that we are sincerely interested in your qualifications. This application, when completed in full will provide a clear understanding of your background and work history which will assist us in placing you in the position that best meets your qualifications and may aid us in possible future upgrading.

(Use Ink – Please Print)

IMPORTANT NOTICE: In compliance with current Legislation, it is the Company's policy to make no discrimination in employment practices because of age, ancestry, color, ethnic background, creed, language, marital or civil status, nationality, national or social origin/condition, physical disability/handicap, place of origin, political opinions or convictions, race, sex or sexual orientation, and any inquires, verbal or written, which would require the applicant to disclose information related to these areas, are strictly prohibited.

Full Name: _____ Contact Tel. No.: _____

Present Address: _____
NO. STREET CITY PROV. POSTAL CODE

Previous Canadian address: _____
(if present address less than 3 years)NO. STREET CITY PROV. POSTAL CODE

Are you legally eligible to work in Canada? YES NO

Are you 18 years of age or older? YES NO

Have you ever been convicted of a criminal offence for which a pardon has not been granted? YES NO

Have you ever applied to Money Mart previously? YES NO

Where did you hear about possible job openings? Newspaper Web Page Agency
 Friend, Who _____ Other _____

List friends or relatives who are or were working for a Cheque Cashing outlet: _____

TYPE OF WORK DESIRED

Position Applied for: _____ Full Time Part Time Temporary Graveyard

AVAILABILITY

Date Available for Employment: _____ Location(s) available for work: _____

Hours Available	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
From							
To							

EDUCATION

(Please do not indicate name or location of school)

Type of School	Years of Education	Courses Majored in	Graduate? Give Degrees
High School			
Business or Trade School			
Community College			
University			
Other Courses			

EMPLOYMENT HISTORY

(Please include summer jobs, part-time work, and any periods of unemployment. List present or last position first)

Name of Organization	From	To
Address	Telephone Number	
Job Title	Name of Supervisor	
Duties		
Reason for Leaving		

Name of Organization	From	To
Address	Telephone Number	
Job Title	Name of Supervisor	
Duties		
Reason for Leaving		

Name of Organization	From	To
Address	Telephone Number	
Job Title	Name of Supervisor	
Duties		
Reason for Leaving		

Name of Organization	From	To
Address	Telephone Number	
Job Title	Name of Supervisor	
Duties		
Reason for Leaving		

May we contact the above listed employers? YES NO

If not, please indicate the employer(s) you do not wish us to contact: _____

REFERENCES

NAME OF PERSONAL REFERENCES (No former employers, relatives or ministers of Religion)	Occupation	Address	Phone Number (Home or Business)
1.			
2.			
3.			
4.			

I represent and warrant that all the information on this application form is true and correct and that I have not withheld any information, which would affect Money Mart's decision to offer me employment. I authorize you to verify the information provided in this application from my schools, former employers, except as noted above under Employment History, credit bureaus or references to furnish any personal or financial information concerning my character or habits as they relate to the employment sought or employment record and I hereby release all such persons from any liability or damages on account of having furnished such information.

I hereby agree that in the event of my application for employment being accepted the terms and conditions of my employment with Money Mart shall be governed by the Money Mart Employment Contract, unless otherwise agreed to in writing I hereby authorize you to conduct a personal investigation or to obtain credit, personal or investigative information reports on me from one or more consumer or credit reporting agencies. This authorization shall continue for any period of employment to which this application may pertain. I understand that a false statement may disqualify me from employment and cause my dismissal.

Signature: _____ Date: _____

Full Name (please print): _____