



Tim Hortons



EMPLOYMENT APPLICATION

Apply now or online at timhortons.com to join our team!

Date of application: _____ Date available to start: _____

How did you hear about this opportunity? _____

If you were referred, please give the name of the team member that referred you: _____

MY AVAILABILITY & JOB POSITION (PLEASE CHECK ALL THAT APPLY)									
POSITION	STATUS	MY HOURS OF AVAILABILITY							
			Mon	Tues	Wed	Thurs	Fri	Sat	Sun
<input type="checkbox"/> Team Member	<input type="checkbox"/> Full-time	FROM							
<input type="checkbox"/> Management	<input type="checkbox"/> Part-time	TO							
Pay Expectations: _____		Preferred number of hours per week: _____							
TELL US ABOUT YOURSELF									
First name: _____ Last name: _____									
Street address: _____									
City: _____ Province: _____ Postal code: _____									
Home Phone #: (____) _____ Cell Phone #: (____) _____ Email: _____									
Are you legally eligible to work in Canada? YES <input type="checkbox"/> NO <input type="checkbox"/>									
MY EDUCATION AND ACTIVITIES									
Please specify highest level of education completed: _____									
What hobbies and/or activities are you involved in? _____									

Continued on reverse side....



It's who you are that makes us who we are.



LIVEWORKSHEETS

MY EMPLOYMENT HISTORY

CURRENT/MOST RECENT EMPLOYER

Can we contact this company? YES ☐ NO ☐

Company: _____ Start date: _____ End date: _____

Supervisor name: _____ Phone #: (____) _____

Position/Duties: _____

Reason for leaving: _____ Starting pay: _____ Ending pay: _____

PREVIOUS EMPLOYER

Can we contact this company? YES ☐ NO ☐

Company: _____ Start date: _____ End date: _____

Supervisor name: _____ Phone #: (____) _____

Position/Duties: _____

Reason for leaving: _____ Starting pay: _____ Ending pay: _____

Have you ever worked for a Tim Hortons before? YES ☐ NO ☐

If yes, which location(s)? _____ Restaurant #: _____

Position held: _____ Start date: _____ End date: _____

Why did you leave? _____

MY THOUGHTS ABOUT HOSPITALITY

What is important to you as a guest at Tim Hortons?

Making our guests happy is our number one priority. How would you help us make that happen?

MY REFERENCES

List any references not given above. Please do not list relatives.

NAME	OCCUPATION	RELATIONSHIP	PHONE NUMBER

Please exclude any reference to any organization which could indicate race, religion, marital status, age, colour, gender, ancestry, political beliefs, sexual orientation, place of origin, physical disability, mental disability or handicap.

The undersigned acknowledges that the foregoing statements and information fully and truthfully set forth the true and accurate personal information of the applicant as of the date hereof. The undersigned further acknowledges that for the purposes of determining the suitability of the undersigned for the position applied for, an investigation may be made with respect to relevant information. The undersigned hereby consents to Tim Hortons or its affiliates or agents collecting and retaining such information and conducting further investigations with respect to relevant information. The undersigned further consents to the updating of this information from time to time, as necessary.

SIGNATURE: _____ DATE: _____

