



# AUXILIARY APPLICATION

FOR AUXILIARY POSITION WITH THE GREATER SUDBURY POLICE SERVICE

COMPLETED APPLICATION MAY BE LEFT WITH INFORMATION OFFICER  
AT 190 BRADY STREET OR MAILED TO:  
HUMAN RESOURCES  
GREATER SUDBURY POLICE SERVICE  
190 BRADY ST.,  
SUDBURY, ONTARIO P3E 1C7

**\*\* THIS APPLICATION MUST BE COMPLETED IN ITS ENTIRETY \*\***

POSITION APPLIED FOR:			
PERSONAL DATA			
SURNAME (PRINT):		GIVEN NAME:	
MAILING ADDRESS: _____ _____		TELEPHONE  RESIDENCE: _____  BUSINESS: _____	
ARE YOU LEGALLY ELIGIBLE TO WORK IN CANADA?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
DO YOU HAVE ANY OBJECTIONS TO WORKING OVERTIME/SHIFT WORK?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
INDICATE IF YOU	SPEAK	READ	WRITE
ENGLISH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FRENCH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER (SPECIFY) _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DESCRIBE ANY OF YOUR SKILLS, EXPERIENCE OR TRAINING THAT RELATES TO THE POSITION BEING APPLIED FOR. _____ _____ _____			

PERSONAL INFORMATION ON THIS FORM IS BEING COLLECTED DURING THE RECRUITMENT PROCESS UNDER THE AUTHORITY OF THE POLICE SERVICES ACT SECTION 43, FOR THE PURPOSE OF ASSESSING YOUR SUITABILITY FOR EMPLOYMENT. QUESTIONS ABOUT THIS COLLECTION SHOULD BE DIRECTED TO:

**HUMAN RESOURCES  
GREATER SUDBURY POLICE SERVICE  
190 BRADY STREET  
SUDBURY, ONTARIO P3E 1C7**

# EDUCATION

## SECONDARY SCHOOL

MAJOR SUBJECT AREA	HIGHEST GRADE OR LEVEL COMPLETED	CERTIFICATE OR DIPLOMA RECEIVED YES <input type="checkbox"/> NO <input type="checkbox"/>
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IF NO GIVE DETAILS \_\_\_\_\_  
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## BUSINESS, TRADE OR TECHNICAL SCHOOL

NAME OF COURSE	LENGTH OF COURSE	CERTIFICATE OR DIPLOMA AWARDED YES <input type="checkbox"/> NO <input type="checkbox"/>
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IF NO GIVE DETAILS \_\_\_\_\_  
\_\_\_\_\_

## COMMUNITY COLLEGE

NAME OF COURSE	LENGTH OF COURSE	CERTIFICATE OR DIPLOMA AWARDED YES <input type="checkbox"/> NO <input type="checkbox"/>
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IF NO GIVE DETAILS \_\_\_\_\_  
\_\_\_\_\_

## UNIVERSITY

NAME OF COURSE	LENGTH OF COURSE	CERTIFICATE OR DIPLOMA AWARDED YES <input type="checkbox"/> NO <input type="checkbox"/>
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IF NO GIVE DETAILS \_\_\_\_\_  
\_\_\_\_\_

## OTHER COURSES, WORKSHOPS, CERTIFICATES

DETAILS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# EMPLOYMENT HISTORY - BEGIN WITH MOST RECENT EMPLOYER

**NOTICE:** DO YOU WISH THIS APPLICATION TO BE KEPT IN THE STRICTEST CONFIDENCE FROM YOUR PRESENT EMPLOYER?      YES       NO

<b>1. PRESENT EMPLOYER</b>	
FROM: _____	TO: _____
PHONE NO.: _____	ADDRESS: _____
TYPE OF BUSINESS: _____	
DUTIES: _____ _____	
JOB TITLE: _____	NAME OF SUPERVISOR: _____
REASON FOR LEAVING:	
<b>2. PAST EMPLOYER</b>	
FROM: _____	TO: _____
PHONE NO.: _____	ADDRESS: _____
TYPE OF BUSINESS: _____	
DUTIES: _____ _____	
JOB TITLE: _____	NAME OF SUPERVISOR: _____
REASON FOR LEAVING:	
<b>3. PAST EMPLOYER</b>	
FROM: _____	TO: _____
PHONE NO.: _____	ADDRESS: _____
TYPE OF BUSINESS: _____	
DUTIES: _____ _____	
JOB TITLE: _____	NAME OF SUPERVISOR: _____
REASON FOR LEAVING:	

IF REQUIRED, PLEASE ATTACH SEPARATE SHEET

## OUTSIDE INTERESTS

COMMUNITY / VOLUNTEER WORK, CLUBS.

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SPORTS, HOBBIES ETC.

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HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENCE FOR WHICH A PARDON HAS NOT BEEN GRANTED?

YES  NO

IF YES, GIVE DETAILS:

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### DECLARATION

I certify that the statements made by me in this application are true and complete to the best of my knowledge and belief and are made in good faith. I understand that if any of these statements are untrue, this application may be rejected or any appointment to a position to be nullified.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of applicant