



# Ahtahkakoop Post Secondary Program

Box 190 Shell Lake, Sask S0J 2G0 Phone: (306) 468-2100

## APPLICATION FOR SUMMER EMPLOYMENT

### Applicant Information

#### Personal Information

Full Name: \_\_\_\_\_  
*Last* *First* *Initial*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* \_\_\_\_\_ *Province* \_\_\_\_\_ *Postal Code*

Home Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_ **Health Card Number:** \_\_\_\_\_

Birth Date: \_\_\_\_\_ Marital Status: \_\_\_\_\_

#### Education History

Post Sec.Educ.: \_\_\_\_\_ Name of Institute: \_\_\_\_\_

Program Start date: \_\_\_\_\_ Program End date: \_\_\_\_\_

Are you available to work the entire summer? \_\_\_\_\_

If not, please indicate the dates you are available. Please note that the availability may influence the number of job opportunities. \_\_\_\_\_

Preference of occupation: \_\_\_\_\_

#### Emergency Contact Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_ *City* \_\_\_\_\_ *Province* \_\_\_\_\_ *Postal Code*

Primary Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

Relationship: \_\_\_\_\_