



SALES DEPARTMENT APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

PLEASE PRINT IN INK. Conditions of employment are stated at the end of this form. Please read carefully before you sign this application. Application must be completed in full even if attaching a resume.

PERSONAL INFORMATION

Name _____ Social Insurance Number _____

Present Street Address _____ How long? _____

City _____ Province _____ Postal Code _____

Previous Address _____

Home Phone (_____) _____ Work Phone (_____) _____

Cell Phone (_____) _____ E-mail Address _____

Are you legally eligible for employment in Canada? Yes No

Have you ever applied for employment to United Laboratories, Inc. Yes No

If yes, when? _____

This job requires the daily use of an automobile, a valid drivers' license and proof of automobile insurance.

Do you have daily use of an automobile? Yes No

Do you have a valid drivers' license? Yes No

Will you be able to provide proof of automobile insurance? Yes No

Date Available for Work _____

Person to contact in an Emergency _____ Phone (_____) _____

Are you able to lift 30 pounds? Yes No

Have you ever been convicted of a crime or violation of the law (other than traffic offenses)? Yes No

If your answer is "yes", please explain. (You may explain orally, if you prefer.) _____

(No applicant will be denied employment solely on the grounds of a conviction. The nature of the offense, the date, the surrounding circumstances and the relevance to the position applied for, however, may be considered.)

EMPLOYMENT BACKGROUND

Begin with your most recent employment.

Job No.	Name of Employer	Address	Phone	Description of Job Duties or Products Sold	From – To Month – Year	Earnings Salary & Commission
1						
	Immediate Supervisor:	Reason for leaving				
2						
	Immediate Supervisor:	Reason for leaving				
3						
	Immediate Supervisor:	Reason for leaving				
4						
	Immediate Supervisor:	Reason for leaving				

If there have been any gaps on your employment, please explain in the space provided below:

EDUCATION BACKGROUND

List All Schools Attended	Name and Address of School	Did You Graduate Yes or No	If Applicable, Year of Anticipated Graduation	Degree	Major Course of Study
High/Prep School					
College					
Graduate School					

Other Degrees, Certificates or Training: _____

Are you presently enrolled in any course or program of Education? _____

If yes, please elaborate: _____

REFERENCES

Whenever possible, please include only those who have information relating to your qualifications for employment.

May we contact your present employer? Yes No If yes, phone number () _____

Reference Name	Relationship	Phone Number	Years Acquainted
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SALES EXPERIENCE

If you were to summarize your total sales experience, what would you say are your strong points and weak points?

What are your future goals? _____

Have you any other business interests which will continue if you come to work for us? Yes No

Explain: _____

Do you have any business and/or personal relationships which may create a conflict of interest for you if you are hired by United Laboratories (for example, are you a party to a non-compete agreement, do you and/or your relatives work for a competitor of United Laboratories, etc.)? Yes No

Explain: _____

NOTIFICATION AND AGREEMENT

PLEASE READ BEFORE SIGNING

I hereby affirm that the information given by me on this application is complete and accurate. I understand that the falsification, misrepresentation or omission of fact will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.

I authorize the investigation of all statements with no liability.

We afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, national origin, marital status, veterans, and individuals with a disability, or any other characteristics protected by law.

If hired, I agree that my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of the Company or myself and will abide by all company rules and regulations.

I understand that the completion of this Application for Employment does not obligate the Company to hire me.

Applicant Signature _____

Date _____

UNITED

LABORATORIES
OF CANADA

UNITED LABORATORIES OF CANADA, INC.

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