

INTERNAL APPLICATION - TEAM ASSISTANT

Please complete this form in its entirety.

Posting Number	
Closing Date	

Personal Information:

Employee Name					
Current Program Location					
Current Position					
Current Status	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Contract		
	<input type="checkbox"/> Temporary F/T	<input type="checkbox"/> Temporary P/T	<input type="checkbox"/> Casual		
Primary Phone #					

How would you rate your performance using the following software systems:

Version:	1-Poor	2-Fair	3-Good	4- Very good	5- Excellent
Microsoft 2010					
Outlook					
Excel					
Word					
Other:					
Approximate typing speed	words/minute				

- Are you prepared to take the skills testing that are required for this position? Yes No
- Do you possess a valid Ontario driver's license? Yes No
- Do you possess valid automobile insurance? Yes No
- Do you own a reliable vehicle to be dedicated to work purposes? Yes No

Qualifications:

List any education, training, skills or certificates you have that would help you to perform the duties of a Team Assistant

* A resume will be required for any employee who is applying for a position in a different classification to which they currently work*