



SUMMER STUDENT RELIEF PROGRAM

PO Box 1590, The Pas, MB R9A 1L4

Email: careers@ckpi.com

Phone (204) 623-8659

PART A: CRITERIA

- Students must have completed one year as a full time post-secondary student in the year immediately preceding the summer employment, (exceptions for students enrolled in Power Engineering in a post-secondary school). Students will be required to submit proof of enrollment.
- Verification of full time studies must be provided to the company in the form of transcripts certification of enrollment from the post-secondary institution registrar's office.**
- Job placement will be limited up to a maximum of four (4) years per student depending upon the length of the academic program. ie. 4 year program, maximum 3 years – 5 years + program, maximum 4 years.
- Students must have the basic qualifications required for the available positions.
- Students must be able to perform the duties of the job and will be required to complete job requirement assessments.
- Unable to perform the job requirements may lead to removal of the student from the program.
- Students are hired for relief purposes, therefore, there is no guarantee of full time hours.
- Application must include a current resume.

PART B: STUDENT INFORMATION

Name:	
Address:	
Telephone number:	Cell:
Email:	
High School Graduation Date:	
Post-Secondary Program Attending:	
Location of Program / Name of Institution:	
Length of Program:	
No. of years attended:	
Status (year level) in program:	Years Remaining:
Available Start Date:	Expected Finish Date:
Type of work you are applying for:	
Were you referred by a CKP Employee? If so please state who:	
Are you over the age of 18?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Have you ever been employed by this company?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Are you legally entitled to work in Canada?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you possess a valid Motor Vehicles Operator's License	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have any disability or health problem which would affect your ability to perform the duties of the job you are applying for?	<input type="checkbox"/> YES <input type="checkbox"/> NO



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PART C: Employment History

Please provide information on your past employment starting with your most recent position	
Company:	Position:
Supervisor/Manager	Telephone Number:
Start Date:	End Date:
Job Duties:	Reason for Leaving:
Company:	Position:
Supervisor/Manager	Telephone Number:
Start Date:	End Date:
Job Duties:	Reason for Leaving:
Company:	Position:
Supervisor/Manager	Telephone Number:
Start Date:	End Date:
Job Duties:	Reason for Leaving:

References

Please provide the names of three references (excluding relatives) whom we may contact about your job performance. Please include at least two former supervisors.	
Name:	Title/Occupation:
Company:	Telephone Number:
Name:	Title/Occupation:
Company:	Telephone Number:
Name:	Title/Occupation:
Company:	Telephone Number:



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PART D: JOB REQUIREMENTS FOR SUMMER STUDENTS

The purpose of this document is to provide information in assessing an Applicant's ability to perform the duties of the above-noted position.

As a summer student your position may involve the following: (Please indicate by checking yes or no)

Are you able to work the following shifts?

Comments

Work 12 hour shifts, rotating days and nights
and working 4 days on, 4 days off

YES NO

Work 10 hour shifts, Monday to Thursday

YES NO

Work 8 hour shifts, Monday to Friday

YES NO

Are you able to carry?

1% - 25% of the time up to 50 pounds/25 kg

YES NO

1% - 25% of the time up to 20 pounds/10 kg

YES NO

1% - 25% of the time up to 10 pounds/5 kg

YES NO

Are you able to maintain the following activities before changing position or activity?

0 – 30 minutes sitting at one time

YES NO

30 – 60 minutes standing at one time

YES NO

0 – 30 minutes driving at one time

YES NO

Are you able to spend?

25% – 50% of the time walking

YES NO

1% – 25% of the time climbing

YES NO

25% – 50% of the time daytime driving

YES NO

50% – 75% of the time nighttime driving

YES NO

1% – 25% of time reaching above shoulder height

YES NO

1% – 25% of the time reaching at shoulder height

YES NO

25% – 50% of time reaching below shoulder height

YES NO

1% – 25% of the time bending or crouching

YES NO

1% – 25% of the time kneeling or crawling

YES NO

Do you have experience operating a:

Forklift

YES NO

Other heavy duty equipment

YES NO

Are you willing to learn

YES NO

Are you able to work in the following conditions **with the appropriate safety training and personal protective equipment:**

Outdoors

YES NO

In extreme cold or heat

YES NO

In damp or humid environment

YES NO

In a noisy environment

YES NO

In a dusty or unventilated environment

YES NO

Around toxic fumes

YES NO



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Do you have a:

- Fear of heights YES NO
Fear of open floor grating YES NO
Fear of small spaces YES NO

Are you able to handle the following materials with the appropriate safety training and personal protective equipment:

- Diesel fuel, Motor oil, Hydraulic oil, Acid,
Caustic materials, Gas, Cleaning product, Salts, etc. YES NO

Additional Comments:

I authorize Canadian Kraft Paper to contact the persons listed above for the purpose of obtaining reference information. These persons are authorized to disclose such reference information.

I hereby certify that I am legally eligible to work in Canada. I also certify that statements made herein are true and that any falsification or willful omission shall be cause for refusal of employment or subsequent dismissal. I agree that the Company has the right to collect, use and disclose the personal information contained in this application solely for the purpose of assessing my suitability for employment with the Company and may require a medical/drug exam and pre-employment testing as it sees fit in connection with this application. It is understood that if employed, I will accept all conditions of employment as set out by CANADIAN KRAFT PAPER INDUSTRIES LTD.

I understand that the information will be used only for the purpose of assessing my suitability for employment at Canadian Kraft Paper Industries Ltd.

APPLICANT SIGNATURE:	DATE:
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