

Introduction to MySchedule Pro Application Form

Thank you for your interest in completing Fraser Health's Introduction to MySchedule Pro course. Please submit the completed form, along with a cover letter and resume to StaffingEducation@fraserhealth.ca

| Applicant Information | | | | | |
|---|--|----------|--|------------------------------|-----------------------------|
| First Name | | | | Last Name | |
| Address | | | | | |
| City | | Province | | Postal Code | |
| Email | | | | Phone Number | |
| Do you indentify as an Indigenous person of Canada? | | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

| Prior Education | | | |
|----------------------------------|--|------------------------------|-----------------------------|
| Completed Grade 12 or Equivalent | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Post Secondary Education | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If Yes, Details: | | | |
| Name of Institution | | Location | |
| Years/Dates Attended | | Degree & Major | |

| Employment Experience | | | |
|---|--|------------------------------|-----------------------------|
| Customer Service Experience | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| In 250 words or less, provide an example that showcases your customer service experience: | | | |
| | | | |
| Staffing Experience | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| In 250 words or less, provide an example that showcases your staffing experience: | | | |
| | | | |
| Scheduling Experience | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| In 250 words or less, provide an example that showcases your scheduling experience: | | | |
| | | | |
| Timekeeping Experience | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| In 250 words or less, provide an example that showcases your timekeeping experience: | | | |
| | | | |

| Key Competencies | |
|---|--|
| Ability to communicate effectively verbally | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| In 250 words or less, provide an example that showcases your ability to communicate effectively verbally: | |
| | |
| Ability to communicate effectively in writing | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| In 250 words or less, provide an example that showcases your ability to communicate effectively in writing: | |
| | |
| Ability to work with others effectively | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| In 250 words or less, provide an example that showcases your ability to work with others effectively: | |
| | |
| Ability to organize your work | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| In 250 words or less, provide an example that showcases your ability to organize your work: | |
| | |

| Ability to operate related equipment/tools | | | | |
|--|---|--|--|--|
| Ability to type 40 wpm or faster | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Microsoft Outlook proficiency | <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced | <input type="checkbox"/> Never used before | | |
| Microsoft Word proficiency | <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced | <input type="checkbox"/> Never used before | | |
| Microsoft Excel proficiency | <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced | <input type="checkbox"/> Never used before | | |

References

As per Fraser Health References policy, we will require references from one current manager and/or one additional manager/supervisor from a previous employer within the last five years. If you have completed a related educational program within the last year, we can also use an instructor from your final placement.

| Reference 1: Current Manager | | | |
|------------------------------|--|------------------|--|
| First and Last Name | | Organization | |
| Job Title | | Dates Supervised | |
| Email | | Phone Number | |

| Reference 2: Previous Manager (within the last 5 years) | | | |
|---|--|------------------|--|
| First and Last Name | | Organization | |
| Job Title | | Dates Supervised | |
| Email | | Phone Number | |

| Reference 3: Instructor (within the last year) | | | |
|--|--|------------------|--|
| First and Last Name | | Organization | |
| Job Title | | Dates Supervised | |
| Email | | Phone Number | |