



## ARNETT & BURGESS EMPLOYMENT APPLICATION FORM

### APPLICANT INFORMATION

|  |               |                           |                                 |  |
|--|---------------|---------------------------|---------------------------------|--|
| <b>Full Name:</b>  |               |                           | <b>Date:</b>                    |  |
|  | <i>Last</i>   | <i>First</i>              |                                 |  |
| <b>Address:</b>  |               |                           |                                 |  |
|  | <i>Street</i> | <i>Apartment/Unit#</i>    |                                 |  |
|  | <i>City</i>   | <i>Province</i>           | <i>Postal Code</i>              |  |
| <b>Home Phone Number:</b>  |               | <b>Cell Phone Number:</b> |                                 |  |
| <b>Email Address:</b>  |               |                           |                                 |  |
| <b>Position Applied For:</b>   |               |                           | <b>Date Available for Work:</b> |  |
| Are you authorized to work in Canada?  | YES           | NO                        |                                 |  |
| Have you ever worked for A&B previously?                                     | YES           | NO                        |                                 |  |
| If "Yes" is selected above, please indicate date(s) when you worked for A&B: |               |                           |                                 |  |
| Aboriginal Affiliation?  | YES           | NO                        |                                 |  |
| If "Yes", please indicate which Community:                                   |               |                           |                                 |  |

### PREVIOUS EMPLOYMENT

**If you have previous Pipeline Construction experience, please ensure you describe the duties that were involved in the Responsibilities field below. Otherwise, please include a description of your job duties in this same field.**

|  |  |                    |  |
|--|--|--------------------|--|
| <b>Company:</b>  |  | <b>Phone:</b>      |  |
| <b>Address:</b>  |  | <b>Supervisor:</b> |  |
| <b>Job Title:</b>  |  | <b>Industry:</b>   |  |
| <b>Responsibilities:</b>   |  |                    |  |
|  |  |                    |  |
|  |  |                    |  |
| <b>Employed From:</b>  |  | <b>To:</b>         |  |
| <i>Includes Leaves of Absence related to Maternity/Paternity, Workers' Compensation Claims, Handicap/Disability or Human Rights Complaints</i>       |  |                    |  |
| <b>Reason for Leaving:</b>   |  |                    |  |
| <i>Do not include Leaves of Absence related to Maternity/Paternity, Workers' Compensation Claims, Handicap/Disability or Human Rights Complaints</i> |  |                    |  |

|  |     |             |
|--|-----|-------------|
| May we contact your previous Supervisor for a reference?   | YES | NO          |
| <b>Company:</b>  |     | Phone:      |
| Address:   |     | Supervisor: |
| Job Title:   |     | Industry:   |
| Responsibilities:  |     |             |
|  |     |             |
| Employed From:   |     | To:         |
| <i>Includes Leaves of Absence related to Maternity/Paternity, Workers' Compensation Claims, Handicap/Disability or Human Rights Complaints</i>       |     |             |
| Reason for Leaving:  |     |             |
| <i>Do not include Leaves of Absence related to Maternity/Paternity, Workers' Compensation Claims, Handicap/Disability or Human Rights Complaints</i> |     |             |
| May we contact your previous Supervisor for a reference?   | YES | NO          |

| <b>EDUCATION</b>       |  |     |                   |     |    |
|------------------------|--|-----|-------------------|-----|----|
| <b>High School:</b>    |  |     | City:             |     |    |
| From:                  |  | To: | Did You Graduate? | YES | NO |
| <b>Post Secondary:</b> |  |     | City:             |     |    |
| From:                  |  | To: | Did You Graduate? | YES | NO |
| Certification:         |  |     |                   |     |    |
| <b>Other:</b>          |  |     | City:             |     |    |
| From:                  |  | To: | Did You Graduate? | YES | NO |
| Certification:         |  |     |                   |     |    |

| <b>CONSTRUCTION EXPERIENCE</b>   |     |                       |     |                    |     |  |     |    |
|--|-----|-----------------------|-----|--------------------|-----|--|-----|----|
| <b>Are you a "Green Hand"? This is defined as being new to the Pipeline and Facility Construction Industry OR if you have worked LESS than 3 months consecutively in the industry.</b> |     |                       |     |                    |     |  |     |    |
|  |     |                       |     | YES                |     |  |     | NO |
| Fill in all years of experience for positions below by "Pipeline", "Facility", "Integrity" and/or "Other Applicable Experience"  |     |                       |     |                    |     |  |     |    |
| PIPELINE CONSTRUCTION  | YRS | FACILITY CONSTRUCTION | YRS | PIPELINE INTEGRITY | YRS | OTHER APPLICABLE EXPERIENCE (Describe Industry and position) | YRS |    |
| Labourer   |     | Labourer              |     | Labourer           |     |  |     |    |
| Welder's Helper  |     | Welder's Helper       |     | Welder's Helper    |     |  |     |    |
| Welder   |     | Welder                |     | Welder             |     |  |     |    |
| Pipefitter   |     | Pipefitter            |     | Pipefitter         |     |  |     |    |
| Lead Hand  |     | Lead Hand             |     | Lead Hand          |     |  |     |    |
| HEO (Dozer)  |     | HEO (Dozer)           |     | HEO (Dozer)        |     |  |     |    |
| HEO (Grader)   |     | HEO (Grader)          |     | HEO (Grader)       |     |  |     |    |

|                 |  |                 |  |                 |  |  |  |
|-----------------|--|-----------------|--|-----------------|--|--|--|
| HEO (Hoe)       |  | HEO (Hoe)       |  | HEO (Hoe)       |  |  |  |
| HEO (Side-boom) |  | HEO (Side-boom) |  | HEO (Side-boom) |  |  |  |
| Foreman         |  | Foreman         |  | Foreman         |  |  |  |
| Superintendent  |  | Superintendent  |  | Superintendent  |  |  |  |
| Bender          |  | Bender          |  |                 |  |  |  |
| Spacer          |  |                 |  |                 |  |  |  |

**NOTE: If none of the above is applicable or you have no experience in the construction segment, please describe all previous relevant positions and the corresponding industry.**

|  |
|--|
|  |
|  |
|  |

### TRAINING & CERTIFICATIONS

| Course/Certificate | Yes | No | Course Name/Number | Date Taken (M/D/Y) | Expiration Date (M/D/Y) |
|--------------------|-----|----|--------------------|--------------------|-------------------------|
| WHMIS              |     |    |                    |                    |                         |
| First Aid          |     |    |                    |                    |                         |
| H2S Alive          |     |    |                    |                    |                         |
| Ground Disturbance |     |    |                    |                    |                         |
| TDG                |     |    |                    |                    |                         |
| Driver's License   |     |    |                    |                    |                         |

### REFERENCES

|                   |  |               |  |
|-------------------|--|---------------|--|
| <b>Full Name:</b> |  | Relationship: |  |
| Company/Industry: |  | Phone:        |  |
| Title:            |  |               |  |
| Address:          |  |               |  |

|                   |  |               |  |
|-------------------|--|---------------|--|
| <b>Full Name:</b> |  | Relationship: |  |
| Company/Industry: |  | Phone:        |  |
| Title:            |  |               |  |
| Address:          |  |               |  |

### DISCLAIMER & SIGNATURE

I understand that the foregoing information is true and complete to the best of my knowledge. I understand that a false statement, in my application or interview, may disqualify me from employment, or cause dismissal.

Online Applicants: Please check here to indicate that you understand this disclaimer before submitting. A signature is not required when applying online.

|            |  |       |  |
|------------|--|-------|--|
| Signature: |  | Date: |  |
|------------|--|-------|--|

**PLEASE SUBMIT APPLICATION BY PRESSING THE "SUBMIT" BUTTON AT TOP RIGHT OF DOCUMENT OR SEND TO "HR@ABPIPELINERS.COM"**