

Candidate Self-Assessment

Read the following statements and circle **YES** when a statement generally applies to you.

When you have responded to all statements, count the YESes and refer to the score chart that follows.

1	I like to work in an office.	YES
2	I like to work with computers.	YES
3	I like to enter information into computer databases.	YES
4	I like to fill in forms.	YES
5	I like to find information.	YES
6	I believe that registry services (e.g., driver's licences, corporate registries, land titles and birth certificates) are important.	YES
7	I like to work with the public.	YES
8	I like to help people determine what products they need and how to get them.	YES
9	I work well under pressure.	YES
10	I don't take rude or angry customers personally.	YES
11	I like to work as a member of a team.	YES
12	I like to give good customer service.	YES
13	I like to go beyond customers' expectations for service.	YES
14	I like detailed work.	YES
15	I like to solve problems.	YES
16	I like to work with policies.	YES
17	I like to learn new things.	YES
18	I feel comfortable handling financial transactions.	YES

SCORE: /18

If your score was:

13-18: You would like most aspects of working as a registry clerk. Please fill out an application form!

7-12: You would like some aspects of working as a registry clerk. It might be a good job for you. Fill out an application form to learn more.

0-6: You would like few aspects of working as a registry clerk. It's probably not the job for you.

Application Form for Registry Clerk

PERSONAL INFORMATION		
Name: (Last)	(First)	(Middle)
Home telephone number	Cell phone number	Email address
Address (Street)		
(City)	(Province)	(Postal Code)
Date available for work		Range of hourly pay expected
What type of schedule would you be willing to work? <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Shifts <input type="checkbox"/> Weekends <input type="checkbox"/> On call		
Are you fluent in written and oral English? <input type="checkbox"/> Yes <input type="checkbox"/> No		Have you received or could you receive a satisfactory Police Information Check (PIC)? <input type="checkbox"/> Yes <input type="checkbox"/> No
WORK HISTORY		
In the following boxes, list employers in consecutive order, beginning with your current or last employer.		
1. Name of Organization		
Employed from (mm/yy) to (mm/yy)		Address
Position held	Supervisor's name, title and telephone number	
Duties		
Reason for leaving		
May we contact the supervisor named above? <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Name of Organization

Employed from (mm/yy) to (mm/yy)	Address
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Position held	Supervisor's name, title and telephone number
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Duties

Reason for leaving

May we contact the supervisor named above?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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3. Name of Organization

Employed from (mm/yy) to (mm/yy)	Address
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Position held	Supervisor's name, title and telephone number
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Duties

Reason for leaving

May we contact the supervisor named above?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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EDUCATION BACKGROUND

Circle highest level completed:	High School	College/University
	9 10 11 12 13	1 2 3 4 5 6

Degrees/Certificates/Diplomas

Other relevant training

Are you currently attending an educational institution?	<input type="checkbox"/> No <input type="checkbox"/> Yes, full time <input type="checkbox"/> Yes, part time
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COMPETENCY PROFILE

Check off the competencies that you have demonstrated in the past through activities at work (volunteer or paid), home or school. Then briefly describe how you demonstrated them.

COMPETENCY:	HOW YOU DEMONSTRATED COMPETENCY IN THE PAST:
<input type="checkbox"/> Provide good customer service	
<input type="checkbox"/> Work well under pressure	
<input type="checkbox"/> Have a positive attitude about work and learning	
<input type="checkbox"/> Exhibit honest and ethical behaviour, e.g., keep information confidential	
<input type="checkbox"/> Handle financial transactions	
<input type="checkbox"/> Use computers	

Do you speak languages other than English?

REFERENCES

At least two of your references should be former employers, and at least one of those, a direct supervisor.

NAME	TELEPHONE NUMBERS (OFFICE and CELL)	OCCUPATION/ BUSINESS	MAILING and EMAIL ADDRESSES	NATURE OF RELATIONSHIP (e.g., SUPERVISOR)
1.				
2.				
3.				

May we contact the references named above? Yes No

I declare that the foregoing information is true and complete to my knowledge. I understand that a false statement may disqualify me from employment.

Signature _____ Date _____