



Please return to Recreation / Tourism Office Once Employee is Hired

**Attn: Lisa Organ
PO Box 179
Port Hood, NS B0 E 2W0
lisa.organ@invernesscounty.ca**

| Organization Name | |
|-------------------|--|
| | |

| Employee Information | |
|---------------------------------|--|
| Name: | |
| Civic Address: | |
| Phone #: | |
| Date of Birth: | |
| Social Insurance Number: | |

| Employment Information | |
|---------------------------------------|--|
| Number of weeks of employment: | |
| Number of hours per week: | |
| Date of hire: | |

Signature of Authorized Contact
for Sponsoring Organization

Date