



CIVIL SERVICE COMMISSION
APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: If the Commission is to deal promptly with your application, answers to questions must be accurate and complete and should be typewritten or legibly handwritten. Failure to complete this form in detail may result in your elimination from the competition.

CANADA
PART 1

FOR USE OF COMMISSION ONLY	
DATE RECEIVED	
APPLICATION NO.	
PREFERENCE	DISPOSAL

1. POSITION APPLIED FOR (USE TITLE ON POSTER)	2. COMPETITION NUMBER
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3. (a) MR. LAST OR FAMILY NAME (PRINT IN BLOCK LETTERS) MRS MISS BANFIELD	3. (b) FIRST AND OTHER NAMES (PRINT IN BLOCK LETTERS) ARTHUR GORDON
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3. (c) IF A MARRIED WOMAN, GIVE MAIDEN NAME:

4. (a) PRESENT MAILING ADDRESS: (NO., STREET, CITY, & PROVINCE) 20 NIVENS AVE. DARTMOUTH, N.S.	4. (b) DATE FROM WHICH YOU HAVE HAD CONTINUOUS RESIDENCE IN PRESENT CITY OR TOWN ... 10th DAY JULY .. MONTH 1956 .. YEAR
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4. (c) IF MARRIED AND REQUIRED TO WORK AT OTHER THAN CENTRE LISTED IN ITEM 4(a), INDICATE CENTRE IN WHICH YOUR FAMILY HAS BEEN MAINTAINED FOR PAST 12 MONTHS: **As in Item 4 (a)**

4. (d) PLACE(S) OF RESIDENCE FOR PAST 2 YEARS (WITH DATES) IF DIFFERENT FROM ITEM 4 (a)

5. HOME TELEPHONE 466-1958	6. BUSINESS TELEPHONE 423-1161 Local 319	7. AGE 57	8. DATE OF BIRTH .. 30 .. DAY .. 7 .. MONTH 1904 YEAR	9. SEX <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE
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10. HAVE YOU ANY PHYSICAL DEFECTS? YES NO IF YES, GIVE DETAILS -

11. (a) ARE YOU A CANADIAN CITIZEN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	11. (b) ARE YOU A BRITISH SUBJECT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	11. (c) IF BY NATURALIZATION, GIVE DATE AND PLACE: by confederation.
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11. (d) HOW LONG HAVE YOU RESIDED IN CANADA? 36 YEARS ... 7 MONTHS	11. (e) IF NOT BORN IN CANADA, GIVE - PORT AND DATE OF ENTRY INTO CANADA ... North Sydney, N.S.
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12. (a) IF A WRITTEN TEST IS GIVEN, WHERE DO YOU CHOOSE TO WRITE? Halifax, N.S.	12. (b) WILL YOU WRITE IN - <input checked="" type="checkbox"/> ENGLISH OR <input type="checkbox"/> FRENCH	12. (c) INDICATE IF YOU - <input checked="" type="checkbox"/> SPEAK ENG. <input type="checkbox"/> READ ENG. <input type="checkbox"/> WRITE ENG. <input type="checkbox"/> SPEAK FR. <input type="checkbox"/> READ FR. <input type="checkbox"/> WRITE FR.
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13. (a) ARE YOU A FEDERAL CIVIL SERVANT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	13. (b) IF YES, STATE DEPARTMENT: Seaward Defence Department of National Defence Naval	13. (c) IF NO, WERE YOU EVER IN THE FEDERAL CIVIL SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO	13. (d) IF YES, STATE DEPARTMENT AND YEAR OF SEPARATION
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14. HAVE YOU EVER BEEN CONVICTED OF ANY OFFENCE OTHER THAN MINOR TRAFFIC VIOLATIONS? IF YES, GIVE DETAILS INCLUDING WHEN AND WHERE THE CONVICTION(S) OCCURRED. YES NO

15. (a) WERE YOU EVER DISMISSED OR FORCED TO RESIGN FROM ANY POSITION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	15. (b) IF YES, GIVE DETAILS, INCLUDING NAME AND ADDRESS OF EMPLOYER(S)
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16. DATE AVAILABLE FOR EMPLOYMENT
WHEN REQUIRED

- THIS FORM IS TO BE SIGNED ON PAGE 4 BY THE APPLICANT -
FOR USE BY CIVIL SERVICE COMMISSION ONLY

RANK	
RATING	
A, B, OR C.	

PART 2

1. EDUCATION

INSTITUTION	NO. OF YEARS	DATE OF LEAVING	NAME AND LOCATION OF INSTITUTION	SUBJECTS SPECIALIZED IN	DEGREE, DIPLOMA OR CERTIFICATE OBTAINED
PRIMARY SCHOOL	8	Dec. 1918	Bay L'Argent Newfoundland	Normal.	
HIGH (SECONDARY) SCHOOL AND/OR TECHNICAL SCHOOL.....					
UNIVERSITY.....					
Correspondence Course.....	4			Mathematics	Grade VIII.
POST-GRAD. COURSES					
PROFESSIONAL COURSES...					
OTHER COURSES.....			H.M.C. Dockyard Halifax, N.S.	Rigging Supervisory	Certificate.

2. EXPERIENCE

PRESENT EMPLOYMENT

NAME AND ADDRESS OF EMPLOYER	POSITION HELD
Department of National Defence (Naval) H.M.C. Dockyard, Halifax, N.S.	Loop Laying Tech II

DUTIES
Direct and Supervise from five to twelve Riggers, Halpers and Electrical Cable splicers in Rigging, Laying and Maintenance of Harbour Defence Asdic and Loops.

SALARY	PERIOD EMPLOYED
\$5160.00	3 years as Civil Servant.

3. LIST BELOW ALL OTHER POSITIONS YOU HAVE HAD INCLUDING ANY EXPERIENCE IN THE FEDERAL CIVIL SERVICE:

PERIOD OF EMPLOYMENT				NAME AND ADDRESS OF EMPLOYER	POSITION HELD	PLACE OF WORK	FINAL SALARY
FROM MONTH	YEAR	TO MONTH	YEAR				
April	1919	Oct.	1924	Harris and Sons Ltd. Grand Bank, Nfld.	Fisherman	Nfld.	
Nov.	1924	June.	1925	Moulton and Sons Halifax, N.S.	Seaman	Canadian Coastwise	
July	1925	Oct.	1926	Sweeney Bros. Dartmouth, N.S.	First Mate	Coastwise	
Dec.	1926	Oct.	1939	National Fish Ltd. Halifax, N.S.	Lead Hand	Halifax	
Oct.	1939	June	1941	Royal Canadian Navy	Leading Seaman	Western Hemisphere	
June.	1941	Aug.	1943	Royal Canadian Navy	Petty Officer	"	
Aug.	1943	June	1945	Royal Canadian Navy	Chief Petty Officer	"	
July	1945	Feb.	1950	D.N.D. (NAVY)	Rigger Charge Hand	Halifax, N.S.	
Feb.	1950	June.	1958	D.N.D. (NAVY)	Electrical Supervisor	Halifax, N.S.	
June	1958	Oct.	1961	D.N.D. (Civil Service)	Tech. II	Halifax, N.S.	\$5160.00

NOTE: Service "Overseas" includes Iceland, Greenland and the Aleutians, but does not include Newfoundland, Bermuda and West Indies

Items 6 to 8 are to be completed only by applicants who served in the War of 1914-18

6. Were you on active service Overseas with any of His Majesty's Forces? YES NO
7. Were you on the High Seas in a sea-going ship of war in the Naval Service of His Majesty? YES NO
8. Did you have service Overseas or on the High Seas in a sea-going ship of war with any of His Majesty's allies? YES NO *If yes, state Service or Force -*

Items 9 to 14 are to be completed only by applicants who served in the War of 1939-45

9. Did you arrive Overseas on or before May 8, 1945 (V-E Day) in connection with the European War and/or before August 15, 1945 (V-J Day) in connection with the Pacific War? YES NO
10. As a member of the Armed Forces did you serve in: Greenland or Iceland on or before May 8, 1945 (V-E Day)? YES NO
The Aleutian Islands on or before August 15, 1945 (V-J Day)? YES NO
11. Were you required as a member of the Royal Canadian Air Force to fly outside of the Territorial Waters of the Western Hemisphere on operational duties? YES NO
12. Was the Operational Flying claimed in Item 11 made on or before May 8, 1945 (V-E Day) in connection with the European War and/or before August 15, 1945 (V-J Day) in connection with the Pacific War? YES NO
13. Did you serve as a member of a ship's complement of the Royal Canadian Navy on the High Seas on or before May 8, 1945 (V-E Day) in connection with the European War and or before August 15, 1945 (V-J Day) in connection with the Pacific War? YES NO
14. Did you serve outside of the Western Hemisphere with any of the Allies of His Majesty? YES NO *If yes, state Service or Force -*

Items 15 and 16 are to be completed only by applicants who served with the Special Korean Force

15. At the date of your enlistment were you a Canadian Citizen? YES NO
16. Were you required to serve outside of Canada or the U.S.A.? YES NO *Was departure date for the Theatre of Operations on or before July 27, 1953? YES NO*

Items 17 and 18 are to be completed only by applicants now in receipt of a disability pension by reason of service in the Armed Forces

17. Was this pension awarded for service in -
- | | | | | | |
|--------------------------|--------------------------|--------------------------|-------------|-------------------------|--|
| 1914-18 WAR | 1939-45 WAR | SPECIAL KOREAN FORCE | PENSION NO. | % OF DISABILITY PENSION | TYPE OF EMPLOYMENT PRIOR TO ENLISTMENT |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |

18. Describe the nature of your disability

Items 19 to 23 are to be completed only by widows whose husbands died owing to active service Overseas in any of the Forces of His Majesty, or of any of the Allies of His Majesty, or due to service on the High Seas in a sea-going Ship of War in the Naval Forces of His Majesty, or of any of the Allies of His Majesty during the Wars of 1914-18, 1939-45, or owing to service with the Special Korean Force.

19. State your husband's name in full
20. His Identification Number
21. Where did your husband reside when he enlisted?
22. What was his rank at time of death?
23. Did your husband serve in - NAVY ARMY AIR FORCE *Are you in receipt of a pension due to your husband's death? YES NO *If yes, give Pension Number -**

Character references, from persons other than relatives, may accompany the application, or may be forwarded, prior to the closing date for receipt of applications, to the office of the Civil Service Commission designated in the competition announcement. These references must indicate clearly the competition number.

These references will NOT be returned to the applicant.

DECLARATION

I certify that the statements made by me in this application are true and complete to the best of my knowledge and belief, and are made in good faith. I understand that if any of these statements are untrue, this application may be rejected or any appointment to a position rescinded.

[Handwritten Signature]
(SIGNATURE OF APPLICANT)

4. DESCRIBE IN DETAIL THE EXPERIENCE YOU HAVE HAD WHICH IS DIRECTLY RELATED TO THE POSITION FOR WHICH YOU ARE APPLYING -

I have been employed in a Supervisory Capacity on the duties chiefly required for this position for approximately 18 years. From August 1943 to June 1945 as a Chief Petty Officer in the Royal Canadian Navy. From July 1945 to June 1958 as a Civilian Supervisor, and from June 1958 to Oct. 1961 as a Loop Laying Technician II.

PART 3 - To be completed only by applicants claiming War Service

NOTE - Western hemisphere includes Newfoundland, Bermuda and West Indies, but does not include Iceland, Greenland and the Aleutians

1.	1914-18- WAR	1939-45 WAR	SPECIAL KOREAN FORCE
(A) IN WHICH OF THE ARMED FORCES DID YOU SERVE: ARMY, NAVY OR AIR FORCE		Navy	
(B) IDENTIFICATION NUMBER		A944	
(C) DATE OF ENLISTMENT		20 Oct, 1939	
(D) RANK ON ENLISTMENT.....		Leading Seaman	
(E) DATE OF DISCHARGE OR RETIREMENT		11 June, 1945	
(F) RANK ON DISCHARGE OR RETIREMENT		Chief Petty Officer	
(G) DID YOU RECEIVE AN HONOURABLE DISCHARGE ON RETIREMENT?(YES OR NO)		Yes	
(H) WHERE DID YOU RESIDE AT TIME OF ENLISTMENT?...		Halifax, N.S.	
(I) HOW LONG HAD YOU RESIDED THERE?		14 Years.	
(J) AT WHAT CENTRE WERE YOU DISCHARGED?...		Halifax, N.S.	
(K) IF MARRIED WHERE DID YOU MAINTAIN YOUR FAMILY DURING THE YEAR PRIOR TO DISCHARGE?.....		Halifax, N.S.	
(L) WHERE DID YOU TAKE UP RESIDENCE ON DISCHARGE?...		Dartmouth, N.S.	

2. (a) Did you serve as an Auxiliary Services Supervisor with the Canadian Legion, Y.M.C.A., Knights of Columbus or Salvation Army in the War of 1939-45? YES NO

(b) Did you reside in Canada when you enlisted as a supervisor and did you serve with and were you attached to the Navy, Army, or Air Force outside of the Western Hemisphere? YES NO

3. Were you a "Special Operator" certified by the Under-Secretary of State for External Affairs and enrolled in Canada by United Kingdom authorities for special duties in war areas outside of the Western Hemisphere during the 1939-45 War? YES NO

4. Did you serve since September 10, 1939, with: (a) Women's Royal Naval Service? YES NO
 (b) Queen Alexandra's Royal Naval Nursing Services or the reserve thereof? YES NO
 (c) The Medical or Dental Branch of the Royal Navy with naval status for general service as a Medical or Dental Practitioner? YES NO
 (d) South African Military Nursing Service outside of Canada? YES NO

5. At the time that you became a member of such service were you domiciled in and a resident of Canada? YES NO