## **Employment Application**

| Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.                            |                     |  | Date of Review (Month/Day/Year) |   |  |
|---|---------------------|--|---------------------------------|---|--|
| APPLICANT DATA:   |                     |  | Position Applied for:           |   |  |
| How were you referred to us:  |                     |  |                                 |   |  |
|   |                     |  |                                 |   |  |
| Full Name:  |                     |  |                                 | NATIONAL STATE OF THE STATE OF |  |
| Address:  | City:               |  | State:                          | Zip:  |  |
| Phone: ( )  | Mobile/Pager/Other: |  | E-mail:                         |   |  |
| Date Available to Start:  | Social Security #:  |  | Salary Requiren                 | nent:   |  |
| If you are under 18 and we require a work permit, can you furnish one?  |                     |  |                                 |   |  |
| If no, please explain:  |                     |  |                                 |   |  |
| Have you ever worked for this company?    Yes    No   |                     |  |                                 |   |  |
| Are you a citizen of the United States?  Ves  No  |                     |  |                                 |   |  |
| If not, are you legally allowed to work in the United States?   Yes  No   |                     |  |                                 |   |  |
| Type of employment desired:   |                     |  |                                 |   |  |
| Have you ever pleaded "guilty," "no contest," or been convicted of a crime?   Yes   |                     |  |                                 |   |  |
| If yes, give dates and details:   |                     |  |                                 |   |  |
|   |                     |  |                                 |   |  |
| Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered. |                     |  |                                 |   |  |
| Driver's license number if applicable to position:  |                     |  |                                 | State:  |  |
|   |                     |  |                                 |   |  |
| SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS:  |                     |  |                                 |   |  |
|   |                     |  |                                 |   |  |
| <u> </u>  |                     |  |                                 |   |  |
|   |                     |  |                                 |   |  |

| PREVIOUS EMPLOYMENT (begin with m   | ost recent position         |   |  |  |  |
|---|-----------------------------|---|--|--|--|
| Dates of Employment: From/  | To/                         | Position(s) Held:   |  |  |  |
| Firm:   |                             | Address:  |  |  |  |
| Phone: ( )  | Supervisor:                 | Title:  |  |  |  |
| Responsibilities:   |                             |   |  |  |  |
|   |                             |   |  |  |  |
| Starting Salary and Title:  |                             | Ending Salary and Title:  |  |  |  |
| Reason for Leaving:   |                             |   |  |  |  |
|   |                             |   |  |  |  |
| May we contact this employer for a reference?   |                             |   |  |  |  |
| Dates of Employment: From//   | To/                         | Position(s) Held:   |  |  |  |
| Firm:   |                             | Address:  |  |  |  |
| Phone: ( )  | Supervisor:                 | Title:  |  |  |  |
| Responsibilities:   |                             |   |  |  |  |
|   |                             |   |  |  |  |
| Starting Salary and Title:  |                             | Ending Salary and Title:  |  |  |  |
| Reason for Leaving:   |                             |   |  |  |  |
|   |                             |   |  |  |  |
| May we contact this employer for a reference?   | s • No                      |   |  |  |  |
| Dates of Employment: From / / /   | To / /                      | Position(s) Held:   |  |  |  |
| Firm: Address:  |                             | rosition(s) ricid   |  |  |  |
| Phone: ( )  | Supervisor:                 | Title:  |  |  |  |
| Responsibilities:   |                             |   |  |  |  |
|   |                             |   |  |  |  |
| Starting Salary and Title:  |                             | Ending Salary and Title:  |  |  |  |
| Reason for Leaving:   |                             |   |  |  |  |
|   |                             |   |  |  |  |
| May we contact this employer for a reference?   | s 🔲 No                      |   |  |  |  |
| I certify that my answers are true and complete to the b<br>employment, educational, financial and other related ma<br>from all liability when responding to inquiries in connect | atters as may be necessary  | thorize you to make such investigations and inquiries of my personal,<br>y for an employment decision. I hereby release employers, schools or individuals |  |  |  |
| In the event I am employed, I understand that false or m  | nisleading information give | en in my application or interview(s) may result in discharge.   |  |  |  |
| Signature of Applicant:   |                             | Date:   |  |  |  |