



### Application for Employment

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.

#### Applicant Data

Position	Date Available to Start	Salary Requirement	Type (FT, PT, Temp)
Last Name	First	M.I.	Date
Social Security Number	Date of Birth	Phone	Mobile/Pager/Other
Address	City	State	Zip Code
E-mail Address	Emergency Contact Name	Phone/Mobile/Pager	Phone/Mobile/Pager

If you are under 18 years of age, can you provide a work permit?  Yes  No If no, please explain:

Have you ever worked for this company?  Yes  No If yes, when?

Are you legally allowed to work in the United States?  Yes  No

Have you ever pleaded guilty, no contest, or been convicted of a crime?  Yes  No If yes, give date(s) 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.

#### Availability (Days of Week and Hours)


#### Summarize Your Special Skills or Qualifications


Previous Employment (begin with most recent position)			
Beginning	Ending	Position(s) Held	
____/____/____	____/____/____		
Company Name	Street	City, State, Zip	Phone Number
Supervisor	Title	Starting Salary and Title	Ending Salary and Title
Reason for Leaving			
May we contact this employer for a reference <input type="checkbox"/> Yes <input type="checkbox"/> No			

Beginning	Ending	Position(s) Held	
____/____/____	____/____/____		
Company Name	Street	City, State, Zip	Phone Number
Supervisor	Title	Starting Salary and Title	Ending Salary and Title
Reason for Leaving			
May we contact this employer for a reference <input type="checkbox"/> Yes <input type="checkbox"/> No			

Beginning	Ending	Position(s) Held	
____/____/____	____/____/____		
Company Name	Street	City, State, Zip	Phone Number
Supervisor	Title	Starting Salary and Title	Ending Salary and Title
Reason for Leaving			
May we contact this employer for a reference <input type="checkbox"/> Yes <input type="checkbox"/> No			

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or individuals from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date