

Complete this form. Print only.

## EMPLOYMENT APPLICATION

APPLICATION INFORMATION		
Last Name	First	M.I.
Street Address		Apartment/Unit #
City	State	Zip
Phone	Email	
Date Available	Social Security No.	Desired Salary
Are you a citizen of the United States?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If no, are you authorized to work in the U.S? Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been convicted of a felony?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, explain

PREVIOUS EMPLOYMENT		
<b>Company</b>		Phone
Address		Supervisor
Job Title	Starting Salary	Ending Salary
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>Company</b>		Phone
Address		Supervisor
Job Title	Starting Salary	Ending Salary
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>Company</b>		Phone
Address		Supervisor
Job Title	Starting Salary	Ending Salary
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? Yes <input type="checkbox"/> No <input type="checkbox"/>		
<b>Company</b>		Phone
Address		Supervisor
Job Title	Starting Salary	Ending Salary
Responsibilities		
From	To	Reason for Leaving

**EDUCATION**

High School			Address	
From	To	Did you graduate?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
College			Address	
From	To	Did you graduate?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
College			Address	
From	To	Did you graduate?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
Other training				

**MILITARY SERVICE**

Are you a veteran? Yes <input type="checkbox"/> No <input type="checkbox"/>	Duty/Specialized training
---	---------------------------

**SKILLS & QUALIFICATIONS**

Other qualifications to be considered
Professional licenses or certifications
Additional languages or occupational skills

**REFERENCES** (Please list three professional references.)

Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	
Full Name	Relationship
Company	Phone
Address	

**INFORMATION TO THE APPLICANT**

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the USA, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.

---

 Signature of Applicant

---

 Date

**Equal Employment Opportunity:** While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no effect on your application for employment.