

## **APPLICATION FOR EMPLOYMENT**

To be considered for employment, you must complete this application form in its entirety and sign it. You may also attach a resume.

Name						
Last	First		Middle			
Present			How long ha			
Address			you lived the	ere?		
Street and No.	City/State	Zip		Years	Months	
Previous			How long die	d		
Address			you live ther	e?		
Street and No.	City/State	Zip		Years	Months	
Telephone No			Are you 18 years of a	ge or older? [ ] Yes	[ ] No	
Have you ever worked for this	company before? [	] Yes [ ] No				
If yes, please give dat	tes and position:					
Do you have any friends or rel	atives working here?					
If yes, Name:			Relationship:			
Have you ever pled guilty or "deferred? [] Yes []			·		osecution	
ii res, piease give dai	te and details of each					
PREVIOUS EMPLOYMENT						
Please list the names of your please list the names of your please sure to account for all periods.		-	-	ent or last employe	listed first.	
Present or Past Employer	Fr	om	Position	Reason for leaving		
Address						
City/State/Zip	Тс	)	Supervisor			
Telephone						
Previous Employer	Fr	om	Position	Reason for leaving		
Address						
City/State/Zip	Тс	)	Supervisor			
Telephone						



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Previous Employer			From		Position	Reason fo	or leaving	
Address								
City/State/Zip			То		Supervisor			
Telephone								
Previous Employer			From		Position	Reason fo	or leaving	
Address								
City/State/Zip			То		Supervisor			
Telephone								
Have you ever been terminated? [ ] Yes [ ] No If yes, please explain circumstances:								
Please explain fully a	any gaps in yo	our employment h	nistory:					
EDUCATION	Cabaal Nama/	Location			Voors Completed	Dograd	C+di	v or Major
Elementary	School Name/	Location			Years Completed	Degree	Studi	y or Major
High School								
College/University								
Graduate/Professional								
Trade/Correspondence								
Other								
Licensure, Registrati	ion, Certifica	tion: (CNA. RN. LPN.	LCSW. PE. 0	CPA, etc.)				
Туре		Registration or Certi			Date Received	Ex	piration Date	
PERSONAL REFEREN	ICES							
(No relatives)	CLS							
Name Relationship			Address			Telephone Number		



## APPLICATION FOR EMPLOYMENT

This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

I HEREBY CERTIFY that all of the information that I have provided in this application is true and accurate.				
Date	Signature of Applicant			

This company is an equal opportunity employer and does not discriminate because of race, color, religion, sex, age, citizenship, marital status, disability, or national origin.

## EQUAL OPPORTUNITY EMPLOYER APPLICANT'S STATEMENT

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at will at any time with or without notice or reason, and the Company has the same right. No one other than the President of the Company has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the Company reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination to the extent permitted by law. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and other information pertinent to my employment with them. I release my previous employers from any liability as a result of their disclosure of information about me to the Company. I also authorize the Company to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I further understand that if employed I will be on a 90-day introductory period, and that termination for unsatisfactory performance during that period will not result in any Company responsibility for unemployment benefits. I further understand that completion of the introductory period does not confer any expectation of continued employment, and that if employed, my employment will be for no definite period and "at-will."

By signing this application, I certify that all of the information that I provide on this application and in any interview will be true, complete and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I will be dismissed.

I certify that I have received a written notification that the Company may obtain a consumer report or reports on me. I authorize this Company to obtain such a report or reports for use in connection with my application for employment and for other employment-related reasons. If hired, this authorization shall remain on file and serve as ongoing authorization for procurement of employment-related consumer reports at any time during my employment. I understand that the term "consumer report" includes, but is not limited to, credit checks, criminal background checks, Department of Motor Vehicle reports, and investigative consumer reports. I authorize the Company to conduct electronic inquiry related to my background, including review of all social networking sites and Internet sites and to make adverse decisions as a result of such inquiries. I further understand that the term "investigative consumer report" means a report in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates, or with others with whom I am acquainted or who may have knowledge concerning any such items of information.