EMPLOYMENT APPLICATION

Please Print Clearly. This application must be completed and all questions regarding your training and work experience answered.

All information on this application is confidential, ____

(hereinafter the Agency) will not contact your present employer without your consent.

Name: (Last)	(First) (Middle Initial)			
Other Name: (If applicable)	Social Security #:			
Address:	Length of time at this address			
Address:	Length of time at this address			
Home Phone:	Other:			
US Citizen:	If no, Immigrant ID/ Card:			
If hired, can you provide proof of legal right to work in the United States?				
Position Applied for:				
Minimum Salary Requiremen	nimum Salary Requirement: Date Available:			
EDUCATION/SCHOOLS	NAME OF SCHOOL	DID YOU	COURSE OR	DIPLOMA OR
ATTENDED	AND ADDRESS	GRADUATE	MAJOR	DEGREE
HIGH SCHOOL				
COLLEGE				
GRADUATE SCHOOL				
BUSINESS SCHOOL				
AIDE TRAINING PROGRAM				

WORK HISTORY (PROVIDE 10 YEARS OF WORK HISTORY)						
Name. Address and Phone # of Current/ Former Employers	From: Mo/Yr	To: Mo/Yr	Job Title	Supervisor's Name	Salary	Reason for leaving

ADDITIONAL REFERENCES

NAME	ADDRESS	RELATIONSHIP

EMPLOYMENT APPLICATION

Have you ever bee	n bonded?	If yes, by Whom:		
Have you ever been refused a bond? If yes, by Whom:				
Have you ever been convicted of a crime? If yes, Explain:				
Professional Licens		Fun Data	V	
Profession:	Lic. No:	Exp. Date:	Verification:	
Professional Licens	ses:			
Profession:	Lic. No:	Exp. Date:	Verification:	
Paraprofessional C	ertification:			
School/Training Pr		Verification:		
Paraprofessional C	ertification:			
School/Training Pr		Verification:		
I certify that the information given by me is true and correct and without any omission and that I made such statements and answers of my own free will. I understand and agree that any false statement or intentional omission on this application or any subsequently furnished from constitutes cause for discharge at any time during my employment by the Agency. I authorize the Agency to investigate all statements made in this application. I further authorize the Agency to make any investigation of my credit, criminal and driving records in connection with this application and anytime thereafter in connection with my employment. I authorized the references listed in this application, to provide the Agency will all information concerning my previous employment and any other pertinent information about me that they may have. I understand that all information obtained during pre-employment screening is held by the Agency is confidential and will not be released to a third party unless the Agency is required by law or is				
specifically authorized to do so by me. I further understand that if I am hired, I will not have an employment contract and that my employment and compensation can be changed or terminated with or without notice or cause at any time by the Agency or by me. Signature: Date:				
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The Agency is an equal opportunity employer. We do not discriminate because of age, race, creed, color, sexual orientation, disability, citizenship status, national origin, marital status, veterans status or the presence of a non-job related medical condition or handicap or any other legally protected status.				

For Administrative Use Only

 Internet Ad Newspaper Ad Government Employment Agency The Agency employee 	Relative	 Friend School Other
Position(s)Applied for: Available	Not Available Other Po	ositions considered for
Hired: Yes No Starting Salary:	[Date of Orientation:
Position Hired For:	Date of Hire:	Start Date:
Notes:		

Completed by: _____ Date: _____