APPLICATION FOR EMPLOYMENT

Position You Are Applying For\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Available for Work\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| PERSONAL INFORMATION |

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| --- |
| Last Name: First Name: Middle Name: |
| Address: City State Zip |
| Home Phone: Cell Phone: Email: |
| Probation Officer/phone number: Social Security Number:  |
| Birthdate: Are you a U. S. Citizen? [ ] Yes [ ] No Have you been convicted of a felony? [ ] Yes [ ]No |
| If selected employment are you willing to submit to pre-employment drug screening? |

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| --- |
| EDUCATION |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School Name | Location | Years Attended | Degree Received | Major |
|  |  |  |  |  |
|  |  |  |  |  |

Other training or licenses held: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| EMPLOYMENT |

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| --- |
| Employer: Dates Employed:  |
| Work Phone: Pay Rate $ |
| Address: |
| City: State: Zip: |
| Position:  |
| Duties Performed:  |
| Supervisors Name and Title: |
| Reason for leaving:  |
| May we contact them? [ ] Yes [ ] No |

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| --- |
| REFERENCES |

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Title | Company | Phone |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Acknowledgement and Authorization

[ ] I certify all answers given herein are true and complete to the best of my knowledge.

[ ] I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

[ ] In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_