

EMPLOYMENT APPLICATION

PERSONAL

Last Name: _____ First Name: _____ MI: _____
SS# ___ - ___ - _____ Present Address:

Home Phone # (____) _____ - _____ Cell # (____) _____ - _____

Email: _____

Permanent Address, if different from present address:

If hired can you provide proof that you are legally able to work in the United States?
Yes No

How were you referred to us? Advertisement / Employee / Employment Agency / Walk-in / Other

Have you ever been convicted of a criminal offense (felony or misdemeanor)? If yes, please state nature of offense(s), date(s), city, state and disposition on a separate sheet of paper. *Note: An affirmative answer will not necessarily result in disqualification for employment:*
Yes No

List any relatives or friends employed by the Company:

Relationship: _____

EMPLOYMENT

Position Desired: _____ Salary Desired:

What days and hours are you available for work?

Are you available for overtime? Yes No Are you over 18 years of age? Yes No

If under 18, can you provide a work permit? Yes No

When are you available to begin work? _____

EMPLOYMENT APPLICATION

Are you able to perform the essential functions of the job for which you are applying?

Yes No

(Note: We comply with the Americans with Disabilities Act and consider reasonable accommodation measures that may be necessary for eligible applicants to perform essential functions)

SKILLS

Many of our [customers/clients/patients] may not speak English. Do you speak, write or understand any foreign language? Yes No

If yes, which language(s) and with what proficiency:

Are you able to operate a personal computer? Yes No

Types of software:

List other office machines you can operate:

Specific skills or training: What knowledge, special skills and/or individual capabilities do you have which especially prepare you for the position applied for?

EDUCATION

Type of School	Name & Location Of School	# of years to completed	Graduated Yes No	Degree(s) or Diploma(s)	Major Field(s) Study
High School or Trade School					
Business or Tech. School					
Jr. College					

EMPLOYMENT APPLICATION

and/or University					
Other Training (Explain)					

EMPLOYMENT HISTORY

Experience: Please account for all employment within the last seven (7) years, beginning with your current or more recent employer. In addition, please indicate any other experience which you believe is relevant to the position for which you are applying. (e.g., volunteer experience, military service, experience gained over seven (7) years prior, etc...) Attach an additional sheet if extra space is needed.

Answer all of the following questions if you are applying for a professional, licensed or certified position

Are you licensed/certified for the job you are applying for? Yes No

Name of license/certification:

Issuing State: _____ License certification #: _____

Has your license/certification ever been revoked or suspended? Yes No

If yes, explain:

POSITIONS HELD

--	--	--

EMPLOYMENT APPLICATION

Company Name:	Dates Employed: From: _____ To: _____	Starting Salary: _____ Ending Salary: _____
Street Address:	Job Title:	Hours Worked From: _____ To: _____
City, State, Zip code _____, ____.	Specific Job Duties: 1. _____ 2. _____ 3. _____	Supervisor: _____
Telephone: (____) ____ - ____	Is this your current employer? Yes No	Reason for Leaving: _____
May we contact this employer? Yes No	What is the most important skill demonstrated on the job? _____	

POSITIONS HELD (cont.)

Company Name:	Dates Employed: From: _____ To: _____	Starting Salary: _____ Ending Salary: _____
Street Address:	Job Title:	Hours Worked From: _____ To: _____
City, State, Zip code _____, ____.	Specific Job Duties: 1. _____ 2. _____ 3. _____	Supervisor: _____
Telephone: (____) ____ - ____	Is this your current employer? Yes No	Reason for Leaving: _____
May we contact this employer? Yes No	What is the most important skill demonstrated on the job? _____	

Company Name:	Dates Employed: From: _____ To: _____	Starting Salary: _____ Ending Salary: _____
Street Address:	Job Title:	Hours Worked From: _____ To: _____
City, State, Zip code	Specific Job Duties: 1. _____ 2. _____	Supervisor: _____

EMPLOYMENT APPLICATION

_____, ____.	3. _____	
Telephone: (____) ____-____	Is this your current employer? Yes No	Reason for Leaving: _____
May we contact this employer? Yes No	What is the most important skill demonstrated on the job? _____	

PERIODS OF UNEMPLOYMENT

Please account for all periods of unemployment within the last seven (7) years, beginning with your most recent period of unemployment.

Dates unemployed From: _____ To: _____	Reason for unemployment: _____
Dates unemployed From: _____ To: _____	Reason for unemployment: _____
Dates unemployed From: _____ To: _____	Reason for unemployment: _____

MILITARY SERVICE

<p>Have you obtained any special skills or abilities as the result of service in the military?</p> <p style="text-align: center;">Yes No</p> <p>If yes, please describe:</p> <p>_____</p> <p>_____</p> <p>_____</p>
--

PERSONAL REFERENCES

Please list at least two (2) persons NOT related to you who have known you for at least five (5)

Years:

EMPLOYMENT APPLICATION

1) Name: _____

Address: _____

Phone #: (____) ____ - _____

2) Name: _____

Address: _____

Phone #: (____) ____ - _____