

Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date:			
Last Name:	First Name:		MI:
Street Address:			
City:	State:	Zip:	
Telephone:			
Email:			
Position applied for:			
How did you hear of this opening? _			
When can you start?	ou start? Desired Wage \$		
Are you a U.S. citizen or otherwise a may be required to provide documen		e U.S. on ar	n unrestricted basis? (You
Are you looking for full-time employ	yment? □ Yes □ No		
If no, what hours are you available?			
Have you ever been convicted of a fe □ Yes □ No If yes, please describe conditions	-	2	
Church Affiliation:			
Education School Name and Location		Year	Degree Achieved
		1001	Degree Achieveu
High School:		<u> </u>	



College:			
College:			
Post-College:			
Other Training:			
		er skills, qualifications, or experience that we	
should consider?			
	ory(Start with your most	recent employer)	
		Telephone:	
		Starting Position:	
Date Ended:	Ending Wage:	Ending Position:	
Name of Supervisor May we contact? \Box	:: Ves □ No		
-			
Reason for Leaving	:		
		Telephone:	
Date Started:	Starting Wage: Ending Wage:	Starting Position: Ending Position:	
Name of Supervisor	Ending Wage		
May we contact? \Box	Yes □ No		
Responsibilities:			
Reason for Leaving	:		



Company Name:			
Address:		Telephone:	
Date Ended:		Starting Position: Ending Position:	
May we contact? \Box Ye	es □ No		
1 2		Telephone:	
Date Ended: Name of Supervisor: _	Ending Wage:	Starting Position: Ending Position:	
May we contact? □ Ye Responsibilities:			
Reason for Leaving:			

Attach additional information if necessary.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager or executive of this company, other than the superintendent, has any authority to alter the foregoing.

Signature:	Date:
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