Employment Application

Programs, services and employment are equally ava qualified applicants. Please inform the Human Resou if you require an accommodation for the application	urces Department	Date of Review (Month/Day/Year) / /	
Applicant Data:		Position Applied for:	
How were you referred to us?			
Full name:			
(LAST)	(FIRST)	(MIDDLE)	
Address: City:		State: Zip:	
Phone: () Mobile/Pager/Othe	ər:	Email:	
Date Available to Start: Social Securit	ty#:	Salary Requirement:	
Are you over 18 years of age? ☐ Yes ☐ No (If not,	employment is subjec	ct to verification that you are of minimum legal	
age and that you are able to supply any required work	permit.)		
Have you ever worked for this company? Yes	No		
Are you eligible for employment in the United States?	☐Yes ☐No		
Type of employment desired: Part-Time Temporary Seasonal			
Have you ever:			
 Been convicted of a criminal offense Pled guilty; Pled 'Nolo Contedre' or 'No Contest'; Had adjudication withheld; 		d guilty of a lesser offense than originally s part of a plea bargain arrangement;	
	6. Been place	6. Been placed on probation;	
	other than	7. Been punished in any manner by a court for a crime, other than a minor traffic violation (DUI is not a minor traffic violation)?	
☐ Yes ☐ No If Yes, please attach a written expla	nation of the situatior	ո.	
Note: Answering "yes" to any of the above questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and its relation to the position applied for will be considered.			
Summarize your special skills and qualifications:			

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Previous Employment (begin with most recent position):		
Previous Employer:		
Dates of Employment: From / / To / / Position(s) Held:		
Phone: () Supervisor: Title:		
Responsibilities:		
Starting Salary and Title: Ending Salary and Title:		
Reason for Leaving:		
May we contact this employer for a reference? ☐ Yes ☐ No		
Previous Employer:		
Dates of Employment: From/ To/ Position(s) Held:		
Phone: () Supervisor: Title: Responsibilities:		
responsibilities.		
Starting Salary and Title: Ending Salary and Title:		
Reason for Leaving:		
May we contact this employer for a reference? \square Yes \square No		
Previous Employer:		
Dates of Employment: From/ _/ To/ Position(s) Held:		
Phone: () Supervisor: Title:		
Responsibilities:		
Starting Salary and Title: Ending Salary and Title:		
Reason for Leaving:		
May we contact this employer for a reference? ☐ Yes ☐ No		
We are an Equal Employment Opportunity Employer. All candidates for employment are subject to pre-employment screenings including verification of credentials, background check and drug testing.		
I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, education, financial, and other related matters as may be necessary for an employment decision.		
I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.		
In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.		
Signature of Applicant:		

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