



## Employment History

Starting with your most recent employer, provide the following information:

<b>Employer</b>	Telephone #  (    )	Dates employed :    Month / Year    to    Month / Year
Street Address	City                      State	Starting Salary                      Ending Salary
Starting job title / Final job title		
Immediate Supervisor and title	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	
Why did you leave?		
Summarize the type of work performed and job responsibilities		
What did you like most about your position?		
What were the things you liked least about the position?		
<b>Employer</b>	Telephone #  (    )	Dates employed :    Month / Year    to    Month / Year
Street Address	City                      State	Starting Salary                      Ending Salary
Starting job title / Final job title		
Immediate Supervisor and title	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	
Why did you leave?		
Summarize the type of work performed and job responsibilities		
What did you like most about your position?		
What were the things you liked least about the position?		
<b>Employer</b>	Telephone #  (    )	Dates employed :    Month / Year    to    Month / Year
Street Address	City                      State	Starting Salary                      Ending Salary
Starting job title / Final job title		
Immediate Supervisor and title	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	
Why did you leave?		
Summarize the type of work performed and job responsibilities		
What did you like most about your position?		
What were the things you liked least about the position?		

**Employment History** (continued)

Explain any gaps in your employment, other than those due to personal illness, injury or disability.

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If not addressed on previous page, have you ever been fired or asked to resign from a job?  Yes  No

If **yes**, please explain \_\_\_\_\_

**Skills and Qualifications**

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying \_\_\_\_\_

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**Computer Skills** (check appropriate boxes. Include software titles and years of experience.)

- Word Processing \_\_\_\_\_ Years: \_\_\_\_\_
- Spreadsheets \_\_\_\_\_ Years: \_\_\_\_\_
- Presentations \_\_\_\_\_ Years: \_\_\_\_\_
- E-mail \_\_\_\_\_ Years: \_\_\_\_\_
- Internet \_\_\_\_\_ Years: \_\_\_\_\_
- Other \_\_\_\_\_ Years: \_\_\_\_\_
- Other \_\_\_\_\_ Years: \_\_\_\_\_
- Other \_\_\_\_\_ Years: \_\_\_\_\_

**Educational Background**

Starting with your most recent school attended, provide the following information.

School (Include City/State)	Years	Completed	GPA	Major / Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		

**References**

List the names and telephone numbers of three business / work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references that are *not* related to you.

Name	Title	Relationship	Telephone	Years Known

**Related Information**

To what job-related organizations (professional, trade, etc.) do you belong? Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran / reserve National Guard or any similarly protected status.

Organization	Office Held

List special accomplishments, publications, awards, etc.

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran / reserve National Guard or any similarly protected status.

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In your current or prior job, have you ever written instructions or directions to be followed by employees or customers?

Yes  No  N/A If **yes**, please explain \_\_\_\_\_

Is there any job – related information you want us to know about? \_\_\_\_\_

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**Applicant Statement**

I certify

that all the information I have provided in order to apply for and secure work with this employer is true, complete and accurate.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non – defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out another application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's Administrator.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

