

EMPLOYMENT

Please give accurate, complete full and part time employment record. Start with your present or most recent employer. At a minimum, include all employers during the past 10 years. Use additional paper if necessary.

1	Company Name	Telephone ()
	Address	Employed (MO/YR) From To
	Name of Supervisor	Hourly Rate
	Job Title and Description of Work	Reason for Leaving

2	Company Name	Telephone ()
	Address	Employed (MO/YR) From To
	Name of Supervisor	Hourly Rate
	Job Title and Description of Work	Reason for Leaving

3	Company Name	Telephone ()
	Address	Employed (MO/YR) From To
	Name of Supervisor	Hourly Rate
	Job Title and Description of Work	Reason for Leaving

4	Company Name	Telephone ()
	Address	Employed (MO/YR) From To
	Name of Supervisor	Hourly Rate
	Job Title and Description of Work	Reason for Leaving

We may contact the employers listed above unless you indicate those you do not want us to contact.	DO NOT CONTACT	
	Employer Number(s) _____	Reason _____

MILITARY	Did you serve in the U.S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", what branch?
Describe any training received relevant to the position for which you are applying. _____		

Additional Information

Membership in professional and civic organizations, special accomplishments, awards, etc.

(Exclude those which may disclose your race, color, religion, age or national origin.)

Do you have a Journeyman's license?

Yes

No

Card No. _____ Exp. Date _____

Do you have a Master's license?

Yes

No

Card No. _____ Exp. Date _____

List any computer skills:

Applicant's Signature

Please read and understand this statement before signing your application.

The information I have provided in this Application for Employment is true, correct and complete. I understand that false, incomplete or misrepresented information of any kind, will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to contact and obtain information about me from previous employers, educational institutions and "references" I provided and any other party necessary to verify the accuracy of information I disclosed in this application, a related employment resume or a personal interview. To assist in the processing of my Application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose.

This application will expire in 24 months. After that date, unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment, I understand I may resign at any time and the employer may terminate my employment at any time, with or without cause and without prior notice. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the

I fully understand and accept all terms and conditions in the above statement.

Date

Signature