

WORK EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer:	Dates Employed: From: _____ To: _____	Work Performed:
Address		
Telephone Number (s)		
Starting/Present Job Title	Hourly Rate/Salary	
Supervisor		
Reason for leaving	May we Contact	YES NO
Employer:	Dates Employed: From: _____ To: _____	Work Performed:
Address		
Telephone Number (s)		
Starting/Present Job Title	Hourly Rate/Salary	
Supervisor		
Reason for Leaving	May we Contact	YES NO
Employer:	Dates Employed: From: _____ To: _____	Work Performed:
Address		
Telephone Number (s)		
Starting/Present Job Title	Hourly Rate/Salary	
Supervisor		
Reason for Leaving	May we Contact	YES NO

PERSONAL/PROFESSIONAL REFERENCES do not include family members or past supervisors.

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

I certify that answers given herein are true and complete. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview (s) may result in discharge. I understand, also, that I am required to abide by all rules and regulation of the employer.

Signature of Applicant

Date