





# Employment Application – Page 2

Employment Information (Cont.)	Description of Duties	
Employer/Kind of Business	Position Title	Number Supervised
Street Address	Specific Duties	
City, State, Zip		
Immediate Supervisor/Title <span style="float: right;">Telephone Number/Ext</span>		
Dates of Employment (Month, Year) From: _____ To: _____		
Total Employment <input type="checkbox"/> Part-time    Hours Worked Per Week Years:    Months: <input type="checkbox"/> Full-time	Reason for job change:	

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Education/Skills Record
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Give your complete educational story. Transcripts of post-high school coursework may be required.	
Languages: Please list languages in which you are fluent, other than English:	List any special skills or course work:
High School: _____ Graduate? Yes    No Post Secondary: _____ _____ Major/Focus: _____ Degree Received (if no degree, write "none"): _____	Military Training: Courses _____ _____  If a license or certificate is required for the position, list here: License Number _____ Trade/Profession: _____ Granted by: _____ Date: _____

I understand that any false information in this application will be sufficient reason for rejection of my application or termination of my employment. I herewith authorize and request each and every former employer, person, firm, corporation, and educational institution to answer any and all questions that may be asked and herewith hold such persons harmless for giving any and all information within their knowledge or records. I have the right to make a written request within a reasonable period of time for complete and accurate disclosure of additional information concerning the nature and scope of this investigation. In addition, my signature on this application form will serve as authorization to release any and all information recorded on or attached to this application to any state or federal investigative agency.

**SIGN HERE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Note: Unsigned applications will not be considered.