Employment 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.

	Dates Employed		Worked Performed
1. Employer			
Address	**From** / /	**To** / /	
Job Title	**Hourly Salary** To Start		
Supervisor	**When Leaving**		
Reason For Leaving			
2. Employer	**Dates Employed**		Worked Performed
Address	**From** / /	**To** / /	
Job Title	**Hourly Salary** To Start		
Supervisor	**When Leaving**		
Reason For Leaving			

	Dates Employed		Worked Performed
3. Employer			
Address	**From** / /	**To** / /	
Job Title	**Hourly Salary** To Start		
Supervisor	**When Leaving**		
Reason For Leaving			
4. Employer	**Dates Employed**		Worked Performed
Address	**From** / /	**To** / /	
Job Title	**Hourly Salary** To Start		
Supervisor	**When Leaving**		
Reason For Leaving			

If you need additional space, please continue on a separate sheet of paper.

List any professional, trade, business or civic activities and offices held.
You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

_____

_____

_____

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can spead,read,or write.			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specualized training, apprenticeship, skills and extra curricular activities.

Describe any job related training received in the United States military.

Additional Information

Other Qualifications

Summarize special job-related skills and qualifiations acquired from employment or other experience.

_____

_____

_____

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of perfonning in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached. ____YES   NO

Specialized Skills   Check Skills/Equipment Operated

___CRT	___Fax	Production/Mobile Machinery (list):	Other (list):
___PC	___Lotus 1-2-3	_____	_____
___Calculator	___PBX System	_____	_____
___Typewriter	___Wordperfect	_____	_____
		_____	_____

References

1._____   (   ) _____
    (Name)   Phone #

_____
    (Address)

2._____   (   ) _____
    (Name)   Phone #

_____
    (Address)

3._____   (   ) _____
    (Name)   Phone #

_____
    (Address)

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

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 regulations of the employer.

_____   _____
Signature of Applicant   Date

FOR PERSONEL AND DEPARTMENT USE ONLY

Arrange Interview   ☐ Yes   ☐ No

Remarks _____

_____
                                           INTERVIEWER   DATE

Employed   ☐ Yes   ☐ No   Date of Employment _____

Job Title _____   Hourly Rate/
                           Salary _____ Department_____

       By _____
                           NAME AND TITLE   DATE

NOTES _____

_____

_____

_____

_____