

APPLICANT INFORMATION			
Name:			
Address:			
Phone:	Email:		
Position Applying for:	[	Date available:	
Are you a United States citizen?	If not, are you a	uthorized to work in the U.S.?	
Have you ever been convicted of a fel	ony?		
If yes, please explain:			
	EDUCATION		
School Name:	(	City, State:	
From: To: Did you gra	duate? [	Degree:	
School Name:	(	City, State:	
From: To: Did you gra	duate? [	Degree:	
	WORK EXPERIENCE		
Employer Name:	S	upervisor:	
Address:	P	Phone:	
Position Title:	E	nding Salary:	
From: To: Hour	s worked per week:		
Duties:			
Reason for leaving:			
May we contact this employer?			
Employer Name:	S	Supervisor:	
Address:	P	'hone:	
Position Title:	E	nding Salary:	
From: To: Hour	s worked per week:		
Duties:			
Reason for leaving:			
May we contact this employer?			
Employer Name:	S	Supervisor:	
Address:	P	hone:	
Position Title:	E	nding Salary:	
From: To: Hour	s worked per week:		
Duties:			

Reason for leaving:

May we contact this employer?

REFERENCES			
Name:	Email:		
	Phone:		
Name:	Email:		
Relationship:	Phone:		
Name:	Email:		
Relationship:	Phone:		

## APPLICANT STATEMENT AND SIGNATURE

With my signature below I certify that all information I have provided in this job application is true, complete, and correct. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information for all references, previous employers, educational institutions, public agencies, licensing authorities to verify the accuracy of the information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives 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 also understand that if this application leads to employment, I must be able to successfully complete a criminal history background check and drug screen and will be expected to work drug and alcohol free throughout my employment.

I also understand that if hired, I will be required to provide proof of identity and legal authorization to work in the United States and that I must complete the I-9 form as required by the federal government.

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

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_