



# Employment History

Provide a complete description. This information will determine if your application will be accepted. Start with your most recent job. For part time work show the average number of hours per month. Indicate any changes in job title under the same employer as a separate position. You may also attach a separate sheet with additional information.

\*\* Please notify office if more employment history forms are required.

## Employer #1

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Employer	Type of Business	Address
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Your title	Reason for Leaving
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Name of Supervisor \_\_\_\_\_

Summarize the nature of work performed and job responsibilities:

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Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Starting Hourly Rate/ Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

Final Hourly Rate/Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

May we contact for reference  yes  no  later

Please identify any exceptions or reasons for not contacting this employer

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Employer #2

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Employer	Type of Business	Address
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Your title	Reason for Leaving
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Name of Supervisor \_\_\_\_\_

Summarize the nature of work performed and job responsibilities:

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Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Starting Hourly Rate/ Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

Final Hourly Rate/Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

May we contact for reference       yes       no       later

Please identify any exceptions or reasons for not contacting this employer

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Employer #3

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Employer	Type of Business	Address
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Your title	Reason for Leaving
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Name of Supervisor \_\_\_\_\_

Summarize the nature of work performed and job responsibilities:

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Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_

Starting Hourly Rate/ Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

Final Hourly Rate/Salary \$ \_\_\_\_\_ Per \_\_\_\_\_

May we contact for reference     yes     no     later

Please identify any exceptions or reasons for not contacting this employer

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Comments including explanation of any gaps in employment:

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Have you ever been dismissed or forced to resign from any employment?

yes                      or                       no

If yes, please explain:

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Are you employed?                       yes                      or                       no

Are you subject to recall?                       yes                      or                       no

May we contact your present employer?                       yes                      or                       no

Skills and Qualifications- Summarize any special training, skills, licenses, certificates, and/or characteristics of yourself that may qualify you as being able to perform job related functions for the position which you are applying.

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# Educational History

## Secondary Education:

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Name of School	Years Attended	Completion (Y/N)
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Address	City	State	Zip Code
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## Higher Education:

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Name of School	Years Attended	Completion (Y/N)
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Address	City	State	Zip Code
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Major Field of Study	Emphasis	Minor
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## Post-Colligate Education:

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Name of School	Years Attended	Completion (Y/N)
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Address	City	State	Zip Code
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Major Field of Study	Emphasis	Minor
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## Vocational Studies:

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Name of School	Years Attended	Completion (Y/N)
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Address	City	State	Zip Code
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Certification Achieved

# References

List the name and telephone number of three business/work references who are not listed on the employment history forms as previous supervisors. If not applicable, then list three school or personal references that are not related to you.

Reference #1

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Name	Telephone Number	Years Known
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Email Address

Reference #2

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Name	Telephone Number	Years Known
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Email Address

Reference #3

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Name	Telephone Number	Years Known
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Email Address

List any additional information that you would like us to consider.

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It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's service I have been employed.

I give the employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for 6 months. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

Signature of Applicant \_\_\_\_\_ Date \_\_\_/\_\_\_/\_\_\_