



# APPLICATION FOR EMPLOYMENT

NAME \_\_\_\_\_ DATE \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_

PHONE # \_\_\_\_\_ OR \_\_\_\_\_

HAVE YOU APPLIED WITH THIS COMPANY BEFORE? \_\_\_\_\_ IF SO, WHEN? \_\_\_\_\_

ARE YOU 18 OR OLDER? \_\_\_\_\_ POSITION APPLYING FOR \_\_\_\_\_

ARE YOU LOOKING FOR FULL TIME or PART TIME? \_\_\_\_\_

DESIRED WAGE \_\_\_\_\_ HOURS & DAYS YOU CAN WORK \_\_\_\_\_

LOCATIONS YOU ARE WILLING TO WORK

\_\_\_CANE MARKET \_\_\_WALKER SOUTH \_\_\_NORTH CORBIN \_\_\_MANDEVILLE \_\_\_ANY

DATE YOU CAN START \_\_\_\_\_ REFERRED BY \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_ DID YOU GRADUATE \_\_\_\_\_

LIST ANY ADDITIONAL EDUCATION/TRAINING \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

LIST ANY AND ALL CHILDCARE JOBS AND/OR RESPONSIBILITIES THAT INVOLVE CARING FOR CHILDREN THAT YOU CONDUCTED AT PREVIOUS PLACES OF EMPLOYMENT AND/OR FOR FAMILY OR FRIENDS

\_\_\_\_\_  
\_\_\_\_\_

PRESENT EMPLOYER \_\_\_\_\_ HOW LONG \_\_\_\_\_

WHY ARE YOU LEAVING YOUR PRESENT EMPLOYMENT? \_\_\_\_\_

## FORMER EMPLOYERS

FROM-TO	NAME & PHONE #	SALARY	POSITION	REASON FOR LEAVING

## APPLICATION FOR EMPLOYMENT

REFERENCES (list three persons not related to you)

	NAME	PHONE NUMBER	How Do You Know This Person?
1			
2			
3			

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employer and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment, for any specific period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

I further acknowledge that I received, read, understand, and agree to the Application Cover Letter prior to completing this application.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

OFFICE USE ONLY  
(Do not write below this line)

REFERENCES CHECKED BY TELEPHONE ON \_\_\_\_\_  
DATE and TIME

REMARKS

- 1 \_\_\_\_\_  
\_\_\_\_\_
- 2 \_\_\_\_\_  
\_\_\_\_\_
- 3 \_\_\_\_\_  
\_\_\_\_\_

SIGNATURE OF PERSON CHECKING REFERENCES \_\_\_\_\_