





**EMPLOYMENT HISTORY**

List below all present and past employment, beginning with your most recent or current job.

I.

Name and Address of Company and Type of Business	From		From		Describe your job duties	Starting Salary	Ending Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.					
Telephone: _____									

II.

Name and Address of Company and Type of Business	From		From		Describe your job duties	Starting Salary	Ending Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.					
Telephone: _____									

III.

Name and Address of Company and Type of Business	From		From		Describe your job duties	Starting Salary	Ending Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.					
Telephone: _____									

IV.

Name and Address of Company and Type of Business	From		From		Describe your job duties	Starting Salary	Ending Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.					
Telephone: _____									

V.

Name and Address of Company and Type of Business	From		From		Describe your job duties	Starting Salary	Ending Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.					
Telephone: _____									

May we contact the employers listed above? (YES) \_\_\_\_\_ (NO) \_\_\_\_\_ If not, indicate by No. which ones(s) you do not wish us to contact.

Numbers: \_\_\_\_\_ Reason: \_\_\_\_\_

**PERSONAL REFERENCES (Not Former Employers or Relatives)**

Name and Occupation	Address	Phone Number	Relationship

**Criminal Background Check**

Have you ever been convicted of a felony? (YES) \_\_\_\_\_ (NO) \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Do you give us consent to run a background check if necessary? (YES) \_\_\_\_\_ (NO) \_\_\_\_\_



**MILITARY SERVICE RECORD**

Were you in the U.S. Armed Forces? (YES) \_\_\_\_\_ (NO) \_\_\_\_\_ If yes, what Branch? \_\_\_\_\_

Dates of duty From \_\_\_\_\_ To \_\_\_\_\_ Rank at discharge: \_\_\_\_\_

List duties in the service including any special training: \_\_\_\_\_

Have you taken any training under the GI Bill of Rights? (YES) \_\_\_\_\_ (NO) \_\_\_\_\_ If yes, what training? \_\_\_\_\_

**SIGNATURE OF APPLICANT - Please read and sign below**

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigations of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

In making this application for employment, I authorize you to make an investigative consumer report whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics, and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of any such investigative report that is made.

Signature of applicant: \_\_\_\_\_

**OFFICE USE ONLY (This area is NOT intended to be used by the applicant!)**

Interviewer	Date	Notes/Comments

**REFERENCE CHECKS RESULTS**

	Name	Comments
1		
2		
3		