

Application for Employment

Position applied for: _____ Date available: _____

Last name _____ First name(s) _____

Street address _____ City _____ State/Province _____ Zip/Postal code _____

Telephone (include area code) _____ Fax _____ E-mail _____

Are you applying for: [] Full-time [] Part-time [] Temporary

Hours available: Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun _____

Work experience (Please list most recent first)

1 Position: _____ Dates of employment: _____
Employer: _____ Address: _____
Supervisor: _____ Telephone: _____ E-mail: _____
Beginning pay: _____ Ending pay: _____
Reason for leaving: _____ May we contact this employer? [] Yes [] No
Responsibilities: _____

2 Position: _____ Dates of employment: _____
Employer: _____ Address: _____
Supervisor: _____ Telephone: _____ E-mail: _____
Beginning pay: _____ Ending pay: _____
Reason for leaving: _____ May we contact this employer? [] Yes [] No
Responsibilities: _____

3 Position: _____ Dates of employment: _____
Employer: _____ Address: _____
Supervisor: _____ Telephone: _____ E-mail: _____
Beginning pay: _____ Ending pay: _____
Reason for leaving: _____ May we contact this employer? [] Yes [] No
Responsibilities: _____

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List other relevant work experience:

Education/training

List secondary and post-secondary education including course of study, and degree or diploma received (highest level achieved first):

List other relevant training (most recent first):

Other activities

List volunteer work, leadership positions, or other activities that you feel may be relevant to this application

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Personal references

Please provide three reference contacts other than family members or people you have previously worked with:

Name	Telephone	Occupation
Name	Telephone	Occupation
Name	Telephone	Occupation

Is there anything else you would like to tell us about yourself?

I certify that all information provided in this application is accurate and complete to the best of my knowledge, and I understand that intentionally providing false information could result in refusal of employment or discharge. I also authorize the employers, schools, organizations, or persons named above to provide information regarding my employment, education, character, and qualifications.

Signature

Date