

May we contact your present employer? Yes _____ No _____

Explain any gaps in work history in excess of one month _____

List any additional skills which may be helpful _____

References:

Name:	Address:	Phone:	Best time to call:	Relationship?
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_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

VERIFICATION

I certify the information set forth in this application, as well as any attached resume, is true and correct to the best of my knowledge. I hereby authorize you to contact any prior employers and release them and you from any liability arising from any disclosure of information that they may make about me (including my work history, background, work habits and job performance). I understand falsification or omission of material facts from this application constitute grounds for immediate discharge. I further understand that acceptance of this application does not constitute any contract of employment and that if employed; I will be employed "at will".

Date: _____ Signature: _____

How do you plan to get to/from work? _____ If not by own transportation, how can we be sure that you will show up for scheduled work? _____

How many days were you absent or tardy from work in the past year (exclude disability-related absences): _____

Emergency contact (day/evening): _____

FOR OFFICE USE ONLY:

Interviewed By: _____	Date: _____
Position (if hired) _____	Start Date: _____
Starting Pay: _____	Department: _____