

Date: \_\_\_\_\_



*This application will be considered current for 6 months from its date. After that period, a new application must be submitted, if you still desire employment with us.*

Your contact information:	
First Name	Last Name
Address	City, State, Zip Code
Phone	E-mail

What position are you applying for? \_\_\_\_\_

When can you start? \_\_\_\_\_

What is your date of birth? \_\_\_\_\_

When are you available to work? (Please check all that apply)

- Weekdays
- Weekends
- Evenings
- Daytime
- Full-time
- Part-time

Weekly Limitations:

\_\_\_\_\_

What special skills or knowledge do you have? (Photography/social media experience, gardening, etc)

\_\_\_\_\_

\_\_\_\_\_

What technologies do you have experience with? Please explain. (Programs, social media platforms, devices, answering phones, website design, etc)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any extra-curricular activities, commitments, or other jobs throughout the year that may affect your scheduling or work requirements? Please explain.

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What do you feel makes you a desirable candidate for this position? Please explain. (Social and communication skills, personality, past experience, etc)

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Reference	
First Name	Last Name
E-mail	Phone

Reference	
First Name	Last Name
E-mail	Phone

Have you been convicted of a felony?

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After employment, can you submit proof of U.S. Citizenship or verification documents of your legal right to work in the United States?

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High School	
School Name	School Address
City, State, Zip	Number of Years Completed
Did You Graduate?	Graduation Date

College/University/Vocational	
School Name	School Address
City, State, Zip	Number of Years Completed
Graduation Date	Degree/Diploma Earned

Previous Employment	
Employer	Address
Phone	E-mail Address
Dates of Work: From: To:	Starting Salary : Ending Salary:
Responsibilities	Reason For Leaving

Previous Employment	
Employer	Address
Phone	E-mail Address
Dates of Work: From: To:	Starting Salary : Ending Salary:
Responsibilities	Reason For Leaving

May we contact your previous employer?

- Yes  
 No

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_