



"A LIGHT FOR THOSE ON THE SPECTRUM"

Employment Job Application

Applicant Information

Full Name: _____ Date: _____
First Last M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email _____

Date Available to start work: _____ Desired Salary: \$ _____

How many hours do you wish to work per week? _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education			
Type of School	Name and Location	Graduate/Degree	Major/Subjects of Study
High School			
College/University			
Graduate School			
Specialty/ Technical/ Vocational School			
Other			

License/Certificate	Date Issued	Date Expired	Issued by/authority issuing or state	License Number

Please list areas of highest proficiency, special skills, and or other items that may contribute to your abilities in performing the above mentioned position.

Previous Employment	
Company: _____	Phone: _____
Location: _____	Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Location: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Location: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Applicant Printed Name: _____

Applicant Signature: _____ Date: _____