

American Legion Post 119 Estes Park, CO 80517

Employment Application

Applicant Information								
Full Name:					Date:			
	Last	First		M.I.				
Address:	Street Address				Apartment/Unit #			
	City			State	ZIP Code			
Phone:		E	Email					
Date Availal	ble:	Social Security No.:		Desired	l Salary: <u>\$</u>			
Position App	plied for:							
Are you a ci	itizen of the United States	YES NO	If no, are you	u authorized to w	YES ork in the U.S.?	NO		
Have you e	ver worked for this compa	YES NO	If yes, when?)				
Have you e	ver been convicted of a fe	YES NO lony?						
If yes, expla	iin:							
Education								
High Schoo	l:	Address:						
From:	To:	Did you graduate?	YES NO	Diploma::				
College:		Address:						
From:	To:	Did you graduate?	YES NO	Degree:				
Other:		Address:						
From:	To:	Did you graduate?	YES NO	Degree:				

References								
Please list thre	ee professional references.							
Full Name:		Relationship:						
Componi		Phone:						
Address:								
Full Name:		Relationship:						
Componi		Phone:						
Address:								
Full Name:		Deletionship						
		Relationship:						
Company: Address:		Phone:						
Address:								
	Previous Employment							
Company:		Phone:						
Address:		Supervisor:						
Job Title:	Starting Salary:	Ending Salary:						
Responsibilities	x							
From:	To: Reason for Leaving:							
May we contact	YES NO tyour previous supervisor for a reference?							
Company:		Phone:						
Address:		Supervisor:						
Job Title:	Starting Salary:	Ending Salary:						
Responsibilities	::							
From:	To: Reason for Leaving:							
	YES NO							
May we contact	t your previous supervisor for a reference?							
Company:		Phone:						
Address:		Supervisor:						
Job Title:	Starting Salary:	Ending Salary:						

Responsibilities:								
From: To:	Reason for Leaving:							
May we contact your previous supervisor for a reference?	YES NO							
Military Service								
Branch:	From: To:							
Rank at Discharge:	Type of Discharge:							
If other than honorable, explain:								
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.								
Signature:	Date:							

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