



Job Application Form

Applicant Information

Full Name:

Interested Role:

Phone Number:

Email Address:

Home Address:

City, State, ZIP:

Education History

High School:

Did you graduate? Yes ☐ No ☐

Diploma:

Undergraduate Degree: Yes ☐ No ☐

Name of College:

Degree Received:

Year Completed:

Graduate Degree: Yes ☐ No ☐

Name of College:

Degree Received:

Year Completed:

Post Graduate Degree/Professional Degree: Yes ☐ No ☐

Name of College

Degree Received



Year Completed:

Licensure/Certifications: Yes ☐ No ☐

If yes, please indicate below:

Licensure/Certification	Date Received	Expiration Date

Employment History

Please list your last two places of employment.

Employer 1 Name:

Job Title:

Dates Employed:

Reason for Leaving:

Employer 2 Name:

Job Title:

Dates Employed:

Reason for Leaving:

Volunteer Experience

Do you have any volunteer experience? Yes ☐ No ☐

If so, please indicate:



References

Please list three references. Professional references preferred.

Reference 1 Name:

Relationship:

Company:

Years Known:

Phone Number:

Reference 2 Name:

Relationship:

Company:

Years Known:

Phone Number:

Reference 3 Name:

Relationship:

Company:

Years Known:

Phone Number:

Availability

Are you available to work evenings? Yes ☐ No ☐

Are you available to work weekends? Yes ☐ No ☐

Are you willing to work full-time hours (40 hrs/week)? Yes ☐ No ☐

Are you willing to work part-time hours (minimum of 25 hrs/week, maximum of 30 hrs/week)? Yes ☐ No ☐



Are you willing to work over the maximum number of hours when needed?

Yes ☐ No ☐

Are you open to seasonal work? Yes ☐ No ☐

Are you open to contract work? Yes ☐ No ☐

Are you willing to travel locally (within the counties served)? Yes ☐ No ☐

Are you willing to travel outside of our locality? Yes ☐ No ☐

Background Check Consent

I, _____, hereby authorize the company to conduct a background check, including but not limited to employment history, criminal background, and references. I understand this information will be used solely for employment purposes and will remain confidential. Please indicate your social security number here:

Also, please confirm that we have retained a copy of your driver's license. Yes ☐ No ☐

Signature: _____ Date: _____

Disclaimer

Applicant understands that this is an Equal Opportunity Employer. To ensure this application is acceptable, please write or print clearly.

Please complete each section EVEN IF you decide to attach a resume.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

Print Name _____ Date: _____

Signature _____