

Employment, continued:

Company Name	Telephone ()
Address	Employed Date (Month and Year) From To
Name of Supervisor	Weekly Pay Start Last
Job Title:	Reason for Leaving:
Duties:	

We may contact the employers listed above unless you indicate those you do not want us to contact.	<i>DO NOT CONTACT</i>
	Employer: _____ Reason: _____

OTHER	
<i>COMPLETE THIS SECTION IF YOU SERVED IN THE ARMED FORCES</i>	Branch of Service
Describe your duties and any special training: _____	Rank at Discharge

<i>DO NOT ANSWER ANY QUESTION IN THIS SECTION UNLESS THE BOX IS CHECKED</i>	
<small>If the employer has checked the box next to the question, the information requested is needed for a legally permissible reason including, without limitation, national security considerations, a legitimate occupational qualification, or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Federal law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of most states also prohibit some of all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status, or physical or mental handicap or disability.</small>	
<input checked="" type="checkbox"/> What was your previous address?	
<input checked="" type="checkbox"/> How long have you lived at your <i>previous</i> address? ____ Years	<input checked="" type="checkbox"/> How long have you lived at your <i>present</i> address? ____ Years
<input checked="" type="checkbox"/> Have you been convicted of a felony in the past ten years? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe.	

REFERENCES		Please provide at least two (2) personal references.
Name	Present Business or Home Address	Business or Occupation

I hereby declare the information provided by me in this <i>Application for Employment</i> is true, correct, and complete to the best of my knowledge. I understand that, if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal.	
Signature _____	Date _____