

EDUCATION

High School: Name and Address of High School:
 Diploma or Equivalency Certification _____
 None - Enter highest grade completed _____

College / University Location	Date Attended	Cr. Hrs. Earned	Degree & Date	Major & Minor

Other College or Training Courses that help you qualify:

Name/Location	Date Attended	Did You Complete?	Total Hours	Title/Description of Course

LIST PROFESSIONAL LICENSES, REGISTRATION OR CERTIFICATES (CNA, ETC.)

Complete Name & Address of Licensing Agency	Date of License	Type of License	Endorsement/Restriction

SPECIAL SKILLS (Check any you possess)

Word Processing Skills: _____ /wpm Ten-Key by Touch: _____
 Computer Skills (specify): _____
 First Aid: _____ CPR _____ Other: _____

EQUIPMENT

List types of equipment you can operate with name or model you have used; e.g. word processing, hooyer lift, adaptive equipment, van lift, etc.

EMPLOYMENT EXPERIENCE

Begin with your present or most recent job and list your work experience with emphasis on experience that is relevant to the position for which you are applying. Include military service and any volunteer work which has provided experience that would help you qualify. List each promotion as a separate position. If you need more space, use a separate sheet following the same format. Complete this information even if you submit a resume .

Information provided is subject to verification. Previous employers may be contacted as references. Do you wish to be informed before we contact your present employer? Yes No

Dates of Employment: From To Full-time Part-time
EMPLOYER Name:
Address: Street or P. O. Box City State Zip Phone No.
Type of Business: Supervisor:
Highest Salary: \$
Volunteer: Ave. Hrs./Wk.:

Describe your duties; job title, skills, abilities required, employees supervised, accomplishments, etc.:

Blank lines for describing duties and accomplishments.

Reason for leaving:

Blank line for reason for leaving.

Dates of Employment: From To Full-time Part-time
EMPLOYER Name:
Address: Street or P. O. Box City State Zip Phone No.
Type of Business: Supervisor:
Highest Salary: \$
Volunteer: Ave. Hrs./Wk.:

Describe your duties; job title, skills, abilities required, employees supervised, accomplishments, etc.:

Blank lines for describing duties and accomplishments.

Reason for leaving:

Blank line for reason for leaving.

EMPLOYMENT EXPERIENCE

Dates of Employment: From _____ To _____ Full-time
EMPLOYER Name: _____ Part-time
Address: _____
Street or P. O. Box City State Zip Phone No.
Type of Business: _____ Supervisor: _____
Highest Salary: \$ _____
Volunteer: _____ Ave. Hrs./Wk.: _____

Describe your duties; job title, skills, abilities required, employees supervised, accomplishments, etc.:

Reason for leaving: _____

I hereby certify that all information on this application is true, correct, and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. I am aware that falsifications or misrepresentations may disqualify me from consideration for employment or, if hired, may be grounds for termination at a later date.

Incomplete or unsigned applications will not be considered

Signature _____ Date _____



PROFESSIONAL REFERENCES

Please provide three (3) references (not relatives).

Name _____

Address _____

Phone No. _____

Years Known _____

Please provide three (3) references (not relatives).

Name _____

Address _____

Phone No. _____

Years Known _____

Please provide three (3) references (not relatives).

Name _____

Address _____

Phone No. _____

Years Known _____

confidential, used only for computerized statistical reports and other lawful uses. Analysis of the information you and others provide will be used to monitor recruitment and selection practices of the employer.

Name _____ (optional)

Location and Title of Job Applied for: _____

Birthdate _____ Male Female
Mo./Day/Yr.

Race/Ethnicity: Please check the one box that best describes your race/ethnicity:

- White (not Hispanic origin) - A person having origins in any of the original peoples of Europe, North Africa or the Middle East
- Black (not Hispanic origin) - A person having origins in one of the black racial groups of Africa.
- Spanish (Hispanic) - A person having origins in Mexican, Puerto Rican, Cuban, Central or South American or other Spanish cultures, regardless of race.
- Asian or Pacific Islander - A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Phillipines and Samoa.
- American Indian or Alaskan Native - A person having origins in any of the original peoples of North America who maintains cultural identification through tribal affiliation or community recognition.

Veteran or Handicapped Status:

Handicapped:

If "yes", check any major disability you have:

- Hearing Impairment
- Mobility Impairment
- Other
- Visual Impairment
- Mental Impairment
- Multiple Impairments

Veteran:

Check the one box that best describes your veteran status:

- Disabled Vietnam Veteran
- Disabled Veteran of Other Campaign or War
- Other Disabled Veteran
- Vietnam Veteran
- Veteran of Other Campaign or War
- Other Veteran

Check the one box that best describes your status as a preference eligible relative.

- A spouse of a disabled veteran
- Unremarried surviving spouse of a veteran or disabled veteran
- Mother of a veteran
- Spouse of a totally (100%) disabled person

Do you have certification from the Department of Social & Rehabilitation Services for Handicapped Person's Employment Preference? Yes No