

(13) Are you able to perform all of the duties of the job you have applied for?

Yes No

(14) Have you ever been convicted of a felony? Yes No

If YES, please explain under EXPLANATIONS.

NOTE: A conviction record will not necessarily exclude you from employment. Factors such as age at time of offense, rehabilitation efforts, length of time since the offense, and nature of crime will be taken into consideration.

(15) Are you a United States citizen, or, do you currently have authorization to work in the U.S.?

Yes No

(16) Did you receive any of your education or employment experience under another name? Yes No

If YES, please explain under EXPLANATIONS.

(17) Have you had disciplinary action taken against you in the past 12 months? Yes No

If YES, explain under EXPLANATIONS.

Note: A YES will not automatically disqualify you.

(18) Have you ever been dismissed or forced to resign from any job held?

Yes No

(19) Were you dismissed or forced to resign for disciplinary reasons? Yes No

If YES to "a" or "b", explain under EXPLANATIONS.

Note: A YES will not automatically disqualify you.

EDUCATION

Provide your complete history.

(20) Indicate highest school year completed, or highest degree earned: _____

(21) Name of High School: _____ City: _____ State: _____

(22) Have you received a high school diploma or equivalent?

Yes No

Higher Education (if applicable)	School Name and Location	Years Attended		Did You Graduate?	Degree, Diploma, or Certificate Earned (or # of years completed)	Major(s) and Minor (if applicable)
		From	Until			
College(s) or University(ies)						
Graduate or Professional Schools						
Technical Institutes, Internship, Other						

KNOWLEDGE, SKILLS & ABILITIES

(23) Please list any knowledge, skills, or abilities you have that you feel are applicable to the position for which you are applying. Include skills with equipment or machines you can operate. If you wish consideration for a secretarial/clerical position, indicate typing speed and software packages known or used.

- (a) _____ (e) _____
- (b) _____ (f) _____
- (c) _____ (g) _____
- (d) _____ (h) _____

REGISTRATIONS, LICENSES, CERTIFICATIONS

(24) List fields of work for which you have been registered, licensed or certified:

Registration: _____ State: _____ No: _____ Exp. Date: _____
 Registration: _____ State: _____ No: _____ Exp. Date: _____
 Other: _____

(25) Please list your VALID DRIVER'S LICENSE NUMBER and the state in which it was issued.

If you do not have a driver's license, please put "NONE" in the blank.

License Number: _____ Issuing State: _____

(26) Is your driver's license a Commercial Driver's License?

Yes No

EMPLOYMENT HISTORY

Record your complete work history in the spaces below. If needed, additional sheets containing the same information and in the same format are acceptable. BEGIN with your current or most recent position. Included military and related volunteer experience. Be sure to account for gaps in your employment history. ALL SPACES MUST BE COMPLETED OR MARKED N/A (not applicable). "See attached resume" is NOT acceptable in the duties space.

A. CURRENT OR MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE or POSITION: _____

Employer or Company: _____ Telephone #: () _____

Employer or Company Address: _____

Starting Wages: _____ Ending (or Current) Wages: _____

Employment Starting Date: _____ Ending Date: _____

Name and title of current or most recent supervisor: _____

Did you hold a supervisory position? _____

If yes, # of employees supervised by you _____

Full-time for: Years _____ Months _____ Part-time for: Years _____ Months _____

If you worked part-time, the number of hours worked per week _____

DUTIES IN ORDER OF IMPORTANCE: _____

REASON FOR LEAVING or DESIRING A CHANGE: _____

B. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE or POSITION: _____
Employer or Company: _____ Telephone #: () _____
Employer or Company Address: _____
Starting Wages: _____ Ending (or Current) Wages: _____
Employment Starting Date: _____ Ending Date: _____
Name and title of current or most recent supervisor: _____
Did you hold a supervisory position? _____
If yes, # of employees supervised by you _____
Full-time for: Years ____ Months ____ Part-time for: Years ____ Months ____
If you worked part-time, the number of hours worked per week _____
DUTIES IN ORDER OF IMPORTANCE: _____

REASON FOR LEAVING or DESIRING A CHANGE: _____

C. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE or POSITION: _____
Employer or Company: _____ Telephone #: () _____
Employer or Company Address: _____
Starting Wages: _____ Ending (or Current) Wages: _____
Employment Starting Date: _____ Ending Date: _____
Name and title of current or most recent supervisor: _____
Did you hold a supervisory position? _____
If yes, # of employees supervised by you _____
Full-time for: Years ____ Months ____ Part-time for: Years ____ Months ____
If you worked part-time, the number of hours worked per week _____
DUTIES IN ORDER OF IMPORTANCE: _____

REASON FOR LEAVING or DESIRING A CHANGE: _____

D. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE or POSITION: _____
Employer or Company: _____ Telephone #: () _____
Employer or Company Address: _____
Starting Wages: _____ Ending (or Current) Wages: _____
Employment Starting Date: _____ Ending Date: _____
Name and title of current or most recent supervisor: _____
Did you hold a supervisory position? _____
If yes, # of employees supervised by you _____
Full-time for: Years ____ Months ____ Part-time for: Years ____ Months ____
If you worked part-time, the number of hours worked per week _____

DUTIES IN ORDER OF IMPORTANCE: _____

REASON FOR LEAVING or DESIRING A CHANGE: _____

E. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE or POSITION: _____

Employer or Company: _____ Telephone #: () _____

Employer or Company Address: _____

Starting Wages: _____ Ending (or Current) Wages: _____

Employment Starting Date: _____ Ending Date: _____

Name and title of current or most recent supervisor: _____

Did you hold a supervisory position? _____

If yes, # of employees supervised by you _____

Full-time for: Years ____ Months ____ Part-time for: Years ____ Months ____

If you worked part-time, the number of hours worked per week _____

DUTIES IN ORDER OF IMPORTANCE: _____

REASON FOR LEAVING or DESIRING A CHANGE: _____

F. NEXT MOST RECENT EMPLOYMENT (or explain gap in employment)

JOB TITLE or POSITION: _____

Employer or Company: _____ Telephone #: () _____

Employer or Company Address: _____

Starting Wages: _____ Ending (or Current) Wages: _____

Employment Starting Date: _____ Ending Date: _____

Name and title of current or most recent supervisor: _____

Did you hold a supervisory position? _____

If yes, # of employees supervised by you _____

Full-time for: Years ____ Months ____ Part-time for: Years ____ Months ____

If you worked part-time, the number of hours worked per week _____

DUTIES IN ORDER OF IMPORTANCE: _____

REASON FOR LEAVING or DESIRING A CHANGE: _____

(27) May we contact your present employer for reference prior to an interview (if granted)? Yes No

If you are not currently employed, please indicate "N/A" here: _____
If NO, explain under EXPLANATIONS.

EXPLANATIONS

ITEM # _____

ITEM # _____

ITEM # _____

Certification and Release (MUST BE SIGNED AND DATED BELOW)

To the best of my knowledge and belief, the information given truly represents my background and experience.

Name (Printed)

Signature

Date