

APPLICATION FOR EMPLOYMENT

This is a drug-free workplace. This organization does not discriminate in hiring of employees on the basis of race, color, religion, national origin, sex, gender, marital status, disability, veteran's status, age (40 years plus), or any other protected category.

PLEASE PRINT. All blanks must be completed. "See resume" is not permissible.

IDENTIFICATION	LAST NAME	FIRST NAME	MIDDLE NAME	OTHER NAMES USED (do not include nicknames)
	CURRENT STREET ADDRESS	CITY	STATE	ZIP CODE
	MOBILE (CELL) PHONE ()	EMAIL ADDRESS		SOCIAL SECURITY NO.
	Have you resided at your current address for at least seven (7) years? ___ Yes ___ No If No, please provide your addresses for the past seven (7) years.			
	PREVIOUS HOME ADDRESS			FROM DATE – TO DATE
	PREVIOUS HOME ADDRESS			FROM DATE – TO DATE
	HOW DID YOU HEAR ABOUT THIS COMPANY?			
	HAVE YOU WORKED FOR US BEFORE? ___ Yes ___ No When?			
	Do you have any relatives who work for this company? ___ Yes ___ No If yes, who?			
	If hired, can you provide eligibility to work in the United States? ___ Yes ___ No			

PERSONAL	What position are you applying for?	Date available to start?	For Supervised Monitor position, are you at least 21 years of age? ___ Yes ___ No
	Can you travel if your job requires it? ___ Yes ___ No	Do you have access to a reliable vehicle? ___ Yes ___ No	Do you have automobile insurance ___ Yes ___ No
	MOBILE (CELL) PHONE ()	EMAIL ADDRESS	SOCIAL SECURITY NO.
	List all languages you can speak, understand and write (fluency):		
	List any other competencies you wish to have considered. (Optional)		

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EDUCATION	HIGH SCHOOL	MAJOR	DEGREE	DATE GRADUATED
	COLLEGE	MAJOR	DEGREE	DATE GRADUATED
	COLLEGE	MAJOR	DEGREE	DATE GRADUATED
	COLLEGE	MAJOR	DEGREE	DATE GRADUATED
	List any other job-related training or courses. (Optional)			
	List any academic, professional, trade, business or civic activities or offices held. You may exclude memberships which may reveal gender, race, religion, national origin, age, ancestry, disability or other protected status. (Optional)			

REFERENCES	<i>Please list three professional references. Do not include friends or family.</i>			
	NAME	POSITION	COMPANY	YEARS KNOWN
	ADDRESS	EMAIL	PHONE	
	NAME	POSITION	COMPANY	YEARS KNOWN
	ADDRESS	EMAIL	PHONE	
	NAME	POSITION	COMPANY	YEARS KNOWN
ADDRESS	EMAIL	PHONE		

EMPLOYMENT	CURRENT OR MOST RECENT EMPLOYER	TELEPHONE	SUPERVISOR'S NAME
	JOB TITLE	START DATE	END DATE
	DUTIES PERFORMED		
	PREVIOUS EMPLOYER	TELEPHONE	SUPERVISOR'S NAME
	JOB TITLE	START DATE	END DATE
	DUTIES PERFORMED		

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LICENSES	<i>Please list any professional licenses you have had or currently hold.</i>			
	TYPE OF LICENSE	STATE	NUMBER	IN GOOD STANDING? ___Yes ___No
	TYPE OF LICENSE	STATE	NUMBER	IN GOOD STANDING? ___Yes ___No
TYPE OF LICENSE	STATE	NUMBER	IN GOOD STANDING? ___Yes ___No	

READ THIS THOROUGHLY BEFORE SIGNING

I certify that all of the information provided in this application for employment is true, correct and complete. Any incorrect or misleading statements will render the application void. Any false statements made in this application will be sufficient cause for the company to withdraw or rescind any offer for employment and/or terminate employment.

I understand that this application will remain in effect for 90 days from the date it is submitted. I must renew my application to be considered for other job openings after 90 days. I understand the completion of this application does not constitute an offer or promise of employment.

I understand that if I should receive a conditional offer of employment, the offer will be subject to a background check and clearance that may include a criminal, child abuse, sex offender, and FBI (Live Scan fingerprinting) investigation report.

If I am appointed to a position with the company, I will comply with company policies and procedures. If I am hired by this company, I understand that my employment will be "at will," meaning my employment may be terminated by either party at any time, with or without cause.

I understand that some positions may require a training reimbursement agreement due to extensive company costs related to training.

Applicant Signature

Date