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| **Application for Employment** |
| Federal and State laws require that all applications be considered without regard to race, religion, color, sex, age, or national origin.  |
| Name: Click here to enter text. | Date: Click here to enter text. |
|  | DOB: Click here to enter a date. |
| Address: Click here to enter text. |
| # Street | City | State, Zip |
| Social Security#: Click here to enter text. | Telephone#: Click here to enter text. |
| Are you a U.S. Citizen? Click here to enter text. | If NO, can you legally remain permanently in the U.S.? Click here to enter text. |
|  | (Proof required by law) |
| Position Applied For: Click here to enter text. | Full Time [ ]  | Part Time [ ]  |
| If part time specify days: [ ] Sun [ ] M [ ]  Tu [ ] W [ ] Th [ ] F [ ] Sat  | Click here to enter text.a.m. | Click here to enter text.p.m. |
| Rate of expected pay $ Click here to enter text. Per hour |
| **EDUCATION** |
| Name and Location of School Courses Years Completed |
| Elementary |
| Click here to enter text. |
| High School |
| Click here to enter text. |
| College Major/Degree |
| Click here to enter text. |
| Other |
| Click here to enter text. |
| You need to disclose all criminal convictions, findings of guilt, and pleas of nolo contendere, ( except minor traffic violations) |
| Click here to enter text. |
| Click here to enter text. |
| I give my consent to a pre-employment criminal record check by my signature below: |
|  |
| Pursuant to Section 610.210 RSMo I give my consent to a closed record check by my signature below: |
|  |  |
| Applicant’s signature: Click here to enter text. | Date: Click here to enter text. |
|  |
| You are required to disclose all Aliases and social security numbers you have used, List them below: |
| Click here to enter text. |

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| **Prior Employment** |
| Employer: | Phone: | From: | To: |
| Click here to enter text. | Click here to enter text. | Click here to enter a date. | Click here to enter a date. |
| Address City, State, Zip | Position |
| Click here to enter text. | Click here to enter text. |
| Duties: Click here to enter text. |
| Supervisor’s Name: |  | Starting Salary/Wage | Click here to enter text. |
| Click here to enter text. | Ending Salary/Wage | Click here to enter text. |
| Reasons for Leaving: Click here to enter text. |
|  |
| Employer: | Phone: | From: | To: |
| Click here to enter text. | Click here to enter text. | Click here to enter a date. | Click here to enter a date. |
| Address City, State, Zip | Position |
| Click here to enter text. | Click here to enter text. |
| Duties:Click here to enter text. |
| Supervisor’s Name: |  | Starting Salary/Wage | Click here to enter text. |
| Click here to enter text. | Ending Salary/Wage | Click here to enter text. |
| Reasons for Leaving: Click here to enter text.  |
|  |
| Employer: | Phone: | From: | To: |
| Click here to enter text. | Click here to enter text. | Click here to enter a date. | Click here to enter a date. |
| Address City, State, Zip | Position |
| Click here to enter text. | Click here to enter text. |
| Duties: Click here to enter text. |
| Supervisor’s Name: |  | Starting Salary/Wage | Click here to enter text. |
| Click here to enter text. | Ending Salary/Wage | Click here to enter text. |
| Reasons for Leaving: Click here to enter text. |
| Notes: Click here to enter text. |
| **PERSONAL REFERENCES** |
| Name | Address | Years Known | Telephone |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| The information provided by me in this application is true and complete to the best of my knowledge. I understand that, if I am employed, misrepresentation or any false statements may be considered cause for possible dismissal. I hereby authorize you to investigate all statements in this application as may be necessary. |
| Signature of Application | Date |
| Click here to enter text. | Click here to enter a date. |

Please send completed Application to our email address (noplacelikehome2009@yahoo.com) when complete. Thank you for your inquiry on a career with us!