



**Employment History**

Dates: To/From	Employer, Address, Phone	Job/Position	Reason for Leaving

**References**

Name	Phone	Company/Position	Years Known

Please include any additional information you feel maybe helpful to us in considering your application.

---



---



---



---

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed; falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the releases or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY**

Date \_\_\_\_\_ Interviewed by \_\_\_\_\_

*Remarks*


Hire Date	Dept.	Position	Start Date	Rate

Hired by \_\_\_\_\_ Date \_\_\_\_\_