

Employment Application

Equal Opportunity Employer

		Ар	plicant	Inforn	nation				
Full Name:	Last	First			MI		Date		
Address:							Apartment/Unit #		
							,		
	City						State	ZIP Cod	le
Phone:					Email: _				
Available St	art Date:				Desired	Salary:	<u>\$</u>		
Position App	blied for:								
How did you about this po	i hear osition?								
Are you lega U.S.?	ally authorized to work in the	YES	NO □						
Have you ev	ver worked for JCEO?	YES	NO □	If yes,	when?				<u> </u>
Are any of y	our relatives employed with u			lf yes,	name &	relatior	nship:		
Have you ev	ver been convicted of a felon	y? □							
lf yes, explai	in:								
				cation					
High School	:	Did you g		YES					
College/Voc	ational:		Address	::					
		Did you ç	graduate	YES ?	NO □	Deg	ree:		
Other:			Address	::					
		Did you g	araduate	YES ?	NO	Deg	ree:		

Skills

List any additional skills, technical, or professional training or knowledge that you feel would support your application:

List any certifications, licenses, or professional achievements that would support your qualifications for employment:

Refer	ences
Please list three professional references.	
Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
Full Name:	Relationship:
Company:	Phone:
Address:	
Previous E	mployment
Job Title:	Supervisor:
Company:	Phone:
Responsibilities:	
	Reason for Leaving:
	YES NO
May we contact your previous supervisor for a reference?	
Job Title:	Supervisor:
Company:	Phone:
Address:	
Responsibilities:	
From: To:	Reason for Leaving:
	YES NO
May we contact your previous supervisor for a reference?	

	Previous	Employme	nt (cont.)				
Job Title:		Supervisor:					
Company:		Phone:					
Address:							
Responsibilities:							
From:	To:	Reason for L	_eaving:				
May we contact your	YES	NO □					
	Diegleimer						

Disclaimer and Signature

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 from 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 release 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.

It is the policy of JCEO to provide equal employment opportunity (EEO) to all persons regardless of age, color, national origin, citizenship status, physical or mental disability, race, religion, creed, gender, sex, sexual orientation gender identity and/or expression, genetic information, marital status, status with regard to public assistance, veteran status, or any other characteristic protected by federal, state or local law.

Applicant's Signature:

Date: _____