



**APPLICANT INFORMATION**

Last Name _____	First _____	M.I _____	Date _____
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Street Address \_\_\_\_\_ Apartment/Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Date Available \_\_\_\_\_ Position Applying for \_\_\_\_\_

Desired Rate of Pay \$ \_\_\_\_\_

Are you a citizen or Permanent resident of the United States?  Yes  No

If no, are you authorized to accept employment in the United States?

Explain \_\_\_\_\_

\_\_\_\_\_

Do you have your PA State Clearances?  Yes  No

Have you ever been convicted of a felony or crime against a child?  Yes  No

**EDUCATION**

High School \_\_\_\_\_ Address \_\_\_\_\_

Did you graduate? \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

College \_\_\_\_\_ Address \_\_\_\_\_

Did you graduate? \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Other \_\_\_\_\_ Address \_\_\_\_\_

Did you graduate? \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**REFERENCES ~ Please list two professional references.**

Full Name \_\_\_\_\_ Relationship \_\_\_\_\_

Company \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Full Name \_\_\_\_\_ Relationship \_\_\_\_\_

Company \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_

**PREVIOUS EMPLOYMENT**

Company: \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_ Responsibilities \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

May we contact your previous supervisor for a reference? \_\_\_\_\_

Company: \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_ Responsibilities \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

May we contact your previous supervisor for a reference? \_\_\_\_\_

Company: \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_ Responsibilities \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

May we contact your previous supervisor for a reference? \_\_\_\_\_

**MILITARY SERVICE**

Branch \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Rank at Discharge \_\_\_\_\_ Type of Discharge \_\_\_\_\_

If other than honorable, explain \_\_\_\_\_

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my ability. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my application being rejected.

X \_\_\_\_\_