

Northland, A Church Distributed

Employment Application

Last Name	First	Middle	Social Security #	Date
Street Address			Home Telephone #	
City, State, Zip			Business Phone#	
Position Desired:			Salary Rate Expected:	
Type of Employment: Full-time: { Part-time: { Number of hours: _____ Date Available: _____				
Would you have steady transportation to work? Yes { No {				
Preferred Location: Dog Track Lyman Mt. Dora West Oaks Oviedo				
<i>Childcare Workers only: Circle days and times available</i>				
Mon AM/PM Tues AM/PM Wed AM/PM Thurs AM/PM Fri AM/PM Sat AM/PM Sun AM/PM				

EDUCATION	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or Diploma
Graduate					
College					
High School					
Other					
Do you intend to continue your education? _____ If yes, when and where? _____					

REFERENCES: (Do not list relatives or previous supervisors)

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

EMPLOYMENT

1	Company Name	Telephone Number ()
	Address	Employed – (State month and year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving

2	Company Name	Telephone Number ()
	Address	Employed – (State month and year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving

3	Company Name	Telephone Number ()
	Address	Employed – (State month and year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work	Reason for Leaving

INTERVIEWER NAME AND COMMENTS

APPLICANT'S SIGNATURE

I AUTHORIZE THE USE OF ANY INFORMATION IN THIS APPLICATION AND ANY ATTACHED SUPPLEMENTS TO VERIFY MY STATEMENTS, AND I AUTHORIZE THE PAST EMPLOYERS, ALL REFERENCES AND ANY OTHERS PERSONS TO ANSWER ALL QUESTIONS ASKED CONCERNING MY ABILITY, CHARACTER, REPUTATION AND PREVIOUS EMPLOYMENT RECORD. I RELEASE ALL SUCH PERSONS FROM ANY LIABILITY OR DAMAGES ON ACCOUNT OF HAVING FURNISHED SUCH INFORMATION.

Name

Date