

Name of employer	Employment dates	
Address	From	
City, State Zip Code	To	
Phone Number	Pay or Salary	
Supervisor's name	Start	
Job Title	Final	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you work at this company.		
Name of employer	Employment dates	
Address	From	
City, State Zip Code	To	
Phone Number	Pay or Salary	
Supervisor's name	Start	
Position	Final	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you work at this company.		
Please list two references other than relatives.		
Name	Name	
Relationship	Relationship	
Address	Address	
Phone Number	Phone Number	
Special Skills and qualifications		
<p>I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.</p> <p>I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.</p> <p>If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.</p> <p>I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.</p> <p>I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.</p> <p>I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.</p>		
Signature of Applicant	Date	