

Employment Application for Holiday Acres

Programs, services and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.	Date of Interview (Month, Day, Year) / /
Applicant Data	
How were you referred to us:	Position Applied For:
Full Name:	
Address: City: State: Zip:	
Phone: Cell Phone: Email:	
Date Available to Start: Social Security Number: Salary Requirements:	
If you are under 18 years of age, can you provide a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain:	
Have you ever worked for this company? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?	
Are you legally allowed to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Type of employment desired: <input type="checkbox"/> Full Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal	
Have you ever pleaded guilty, no contest or been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give dates and details:	
Answering yes to the questions does not constitute an automatic rejection for employment. Date of offense, seriousness and violation, rehabilitation and position applied for will be considered.	
Driver's license (if applicable to position): State:	
Summarize Your Special Skills or Qualifications	

Previous Employment (begin with most recent position)

Dates of Employment From ___/___/___ To ___/___/___ Position(s)Held: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes No

Dates of Employment From ___/___/___ To ___/___/___ Position(s)Held: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes No

Dates of Employment From ___/___/___ To ___/___/___ Position(s)Held: _____

Company Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for a reference? Yes No

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding o inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ **Date:** _____

