

Kee to Independent Growth, Inc.
Application of Employment

Position Applying For: _____ Date of Application: _____

Personal Information

Name: _____
Last First MI

Address: _____
Number & Street City State Zip Code

Phone: _____
Home Cell

E mail: _____ Driver License # _____ State _____
Optional

Social Security Number: _____

Are you eligible to work in the United States? Yes _____ No _____

Are you 18 years of age or older? Yes _____ No _____

Have you had any moving violations in the last 2 years on your driver license? Yes _____ No _____

Have you been convicted of or pleaded no contest to a felony charge in the last 5 years? Yes _____ No _____

If yes, please explain: _____

What date are you available to start work? _____ What days/hours are you available for? _____

Are you looking for Full-time _____ or Part-time _____ employment?

Education

Name and Address of High School: _____

Did you receive a diploma/GED? Yes _____ No _____ What year? _____

Course of Study: _____

Name and Address of College/University/Trade School: _____

Did you graduate? Yes _____ No _____ What year? _____

Course of Study: _____

Name and Address of Trade School/College/University: _____

Did you graduate? Yes _____ No _____ What year? _____ If you did not graduate, do you have a GED? Yes _____ No _____

Course of Study: _____

Skills and qualifications: Licenses, Skills, Training, Awards: _____

Employment History

Present or Last Position Title: _____

Employer: _____

Address: _____

Supervisor: _____

Phone: _____ From: _____ To: _____

Responsibilities: _____

Salary: _____ May we contact this employer? Yes _____ No _____

Reason for Leaving: _____

Previous Position: _____

Name of Employer: _____

Address: _____

Supervisor: _____

Phone: _____ From: _____ To: _____

Responsibilities: _____

Salary: _____ May we contact this employer? Yes _____ No _____

Reason for Leaving: _____

References

(You must include at least one professional reference.)

Name: _____ Phone: _____

How do you know this person? _____

Name: _____ Phone: _____

How do you know this person? _____

Name: _____ Phone: _____

I certify that the information contained in this application is true and complete. I understand that false information may be grounds for not hiring or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature of Applicant

Date