



Employment Application

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Position Applied for	Desired Salary	Date Available	
Days/Hours Available:		Are you authorized to work in the U.S.?	YES NO
Referred By		Are you 18 years of age or older?	YES NO
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
EDUCATION			
High School		Location	
Number of Years Completed	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		
College		Location	
Number of Years Completed	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree(s) Received/Subjects Studied
Other		Location	
Number of Years Completed	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree(s) Received/Subjects Studied
GENERAL			
Job Related Skills (typing, driver's license, first aid/cpr, etc.)			
Subjects of Special Study/Activities other than Religious (civic, athletic, etc.):			
REFERENCES			
<i>Please list below three non-related personal references.</i>			
Name		Title/Relationship	
Address		Phone	
Name		Title/Relationship	
Company/Address		Phone	
Name		Title/Relationship	
Company/Address		Phone	

Watauga Opportunities provides equal employment opportunities to all employees and applicants and prohibits discrimination and harassment on any basis including race, color, religion, age, sex, national origin, disability status, genetics, protected veteran status, sexual orientation, gender identity or expression, or any other characteristic protected by federal, state or local laws.

This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation and training.

PREVIOUS EMPLOYMENT LIST BELOW YOUR LAST THREE EMPLOYERS, STARTING WITH MOST RECENT ONE FIRST.

Employer		Supervisor	
Address		Phone	
Job Title		Salary	\$
Responsibilities			
From	To	Reason for Leaving	
May we contact this supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Employer		Supervisor	
Address		Phone	
Job Title		Salary	\$
Responsibilities			
From	To	Reason for Leaving	
May we contact this supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Employer		Supervisor	
Address		Phone	
Job Title		Salary	\$
Responsibilities			
From	To	Reason for Leaving	
May we contact this supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

DISCLAIMER AND SIGNATURE

I authorize investigation on all statements contained in this application. I understand that misrepresentation of information requested is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without cause and without any previous notice.

Signature:	Date:
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DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY

Interviewed by/Date:

Remarks:

References Checked by/Date/Comments:

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