

Name of Supervisor	Employed From (Month & Year) From To	Pay Received (hourly/salary) Start Last
Job Title	Reason for Leaving	May we contact this Employer?
Describe your Duties: _____		
Company Name	Address	Telephone/Email
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References

Name	Address	Telephone #	Occupation

Affidavit

I certify that, to the best of my knowledge, the information contained in this application is true and complete. I understand that any false, misleading, or incomplete information provided by me during the hiring process may result in denied or termination of employment.

I understand that, if I am hired, I must produce applicable document confirming my identity and showing I am lawfully authorized to work in the United State, in accordance with the immigration Reform and Control Act of 1986, as amended.

I understand and agree that my prior employers, educational institutions and other references, listed or not listed on the application, may be contacted by the Company. These references are authorized to give the Company any and all pertinent information they may have. I release all persons or entities involved, in the Company, from all liability arising from this contact and provision of information.

I agree to submit to any post-offer, pre-employment, testing or physicals, as required by the Company.

I authorize the Company to conduct a criminal history check and understand that unexpunged criminal convictions may be considered by the Company in making hiring decision. I agree to conform to all Company's policies, rules, and procedures.

Furthermore, I understand and agree that nothing contained in this employment application, the granting of an interview, or in the offer of employment creates a contract for employment between the Company and myself. I fully understand and accept all terms and conditions in the above statement.

Signature _____ Printed Name _____

Date _____