



Employment Application

APPLICANT INFORMATION										
Last Name					First				M.I.	Date
Street Address							Apartment/Unit #			
City					State				ZIP	
Phone					E-mail Address					
Date Available								Desired Salary		
Position Applied for										
Hours available to work										
Days	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday				
Start										
End										
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?						
EDUCATION										
High School					Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
College					Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
Other					Address					
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
REFERENCES										
<i>Please list three professional references.</i>										
Full Name					Relationship					
Address					Phone					
Full Name					Relationship					
Address					Phone					
Full Name					Relationship					
Address					Phone					



Employment Application

Company					Phone					
Address					Supervisor					
Job Title					Starting Salary		\$		Ending Salary	\$
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>		NO <input type="checkbox"/>				
Company					Phone					
Address					Supervisor					
Job Title					Starting Salary		\$		Ending Salary	\$
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>		NO <input type="checkbox"/>				
Company					Phone					
Address					Supervisor					
Job Title					Starting Salary		\$		Ending Salary	\$
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>		NO <input type="checkbox"/>				
<p>Are you able to perform the job functions applied for with or without an accommodation? YES NO If you can perform the function with an accommodation, explain how you would perform the tasks, and with what accommodation?</p>										
<p>SCAT is an equal opportunity employer. (EOE)</p>										
<p>DISCLAIMER AND SIGNATURE</p> <p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p>										
Signature								Date		