



Problems become possibilities... when the right people join together. . . **Be the Bridge!**

EMPLOYMENT APPLICATION

Thank you for your interest in joining the Advanced Employment, Inc. team. Please complete the application and authorization forms to be considered. Someone from our office will follow up with you as soon as possible.

APPLICATION PART I: Fill out the application and submit

TODAY'S DATE AVAILABLE START DATE Type of Employment Desired: Full Time Part Time
Days/Hours per week

POSITION APPLYING FOR

NAME LAST FIRST MIDDLE

ADDRESS STREET CITY STATE ZIP

PHONE: (CELL) (HOME) (WORK)

EMAIL SOCIAL SECURITY# DATE OF BIRTH

Best time and preferred way to reach you: _____

Drivers License _____ Do you have a car available for work use? _____

Skills, Training & Qualifications

List Relevant Skills, Training & Qualifications for this Position

Have you ever been convicted of a felony or released from prison in the past 10 years? yes / no
(If yes, the nature of offense & date will be considered in determining eligibility) *

Any other commitments that may affect your employment?

EMPLOYMENT APPLICATION (continued , page 2)

WORK EXPERIENCE: Employer #1

EMPLOYER			MAY WE VERIFY EMPLOYMENT?	
ADDRESS	STREET	CITY	STATE	ZIP
PHONE:	(CELL)	(HOME)	(WORK)	
DATES OF EMPLOYMENT:		HOURS PER WEEK	PAY / RATE	
POSITION				
Description of Responsibilities:				
Reason for leaving:				
Supervisor/Reference Contact Information:				

WORK EXPERIENCE: Employer #2

EMPLOYER			MAY WE VERIFY EMPLOYMENT?	
ADDRESS	STREET	CITY	STATE	ZIP
PHONE:	(CELL)	(HOME)	(WORK)	
DATES OF EMPLOYMENT:		HOURS PER WEEK	PAY / RATE	
POSITION				
Description of Responsibilities:				
Reason for leaving:				
Supervisor/Reference Contact Information:				

WORK EXPERIENCE: Employer #3

EMPLOYER			MAY WE VERIFY EMPLOYMENT?	
ADDRESS	STREET	CITY	STATE	ZIP
PHONE:	(CELL)	(HOME)	(WORK)	
DATES OF EMPLOYMENT:		HOURS PER WEEK	PAY / RATE	
POSITION				
Description of Responsibilities:				
Reason for leaving:				
Supervisor/Reference Contact Information:				

EDUCATIONAL BACKGROUND

	School Name	Address w/city and state	Years Attended	Degree Yes /No	Major
High School					
GED					
College/ University					
Trade/Business or Other					



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Authorization and Certificate of Applicant

Please read carefully and sign the following Authorization and Certificate form.

I authorize Advanced Employment, Inc. to make inquiry information from any person or organization regarding my suitability for employment, and give my permission to these persons or organizations harmless from any liability for the release of said information. Such information may include and not be limited to the quality and quantity of my work, work history, character, qualifications, educational record, records of convictions and medical records. I understand that the information obtained may be such as to disqualify me from employment. I understand that such information is sought with confidentiality, and I will not request copies of such information.

I certify that all statements made on this application are true and complete, accurate and not misleading to the best of my knowledge. I understand that false statements, incomplete statements, or misrepresentations may subject me to disqualification or dismissal. I understand that a photocopy of the authorization shall be as effective of the original.

SIGNATURE OF APPLICANT

DATE

Advanced Employment, Inc. is an Equal Opportunity Employer and does not discriminate against an applicant for employment on the basis of race, religion, age, handicap, sex, national origin, ancestry, political affiliation, color, creed, marital status, sexual preferences or arrest record.

FOR OFFICE ONLY			
Date Received:	_____	File Until:	_____
Date Reviewed:	_____	Initial:	_____
Interview:	_____	Follow-Up:	_____