

EDUCATION

	HIGH SCHOOL	UNDERGRAD COLLEGE	GRADUATE/PROFESSIONAL							
SCHOOL NAME AND LOCATION:										
YEARS COMPLETED	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; height: 20px;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>					<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; height: 20px;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>				
DIPLOMA/DEGREE										
DESCRIBE COURSE OF STUDY										

DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP, SKILLS AND EXTRA-CURRICULAR ACTIVITIES			
DESCRIBE ANY HONORS YOU HAVE RECEIVED			
STATE ANY ADDITIONAL INFORMATION YOU FEEL MAY BE HELPFUL TO US IN CONSIDERING YOUR APPLICATION			

INDICATE ANY FOREIGN LANGUAGES YOU CAN SPEAK, READ, AND OR WRITE:

	FLUENT	GOOD	FAIR
<i>SPEAK</i>			
<i>READ</i>			
<i>WRITE</i>			

LIST PROFESSIONAL, TRADE, BUSINESS OR CIVIC ACTIVITIES AND OFFICES HELD:

(You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status)

HAVE YOU EVER HAD ANY JOB-RELATED TRAINING IN THE UNITED STATES MILITARY?

YES NO

IF YES, PLEASE DESCRIBE:

ARE YOU PHYSICALLY OR OTHERWISE UNABLE TO PERFORM THE DUTIES OF THE JOB FOR WHICH YOU ARE APPLYING?

YES NO

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience:

REFERENCES

1

NAME *TELEPHONE NUMBER*

ADDRESS

2

NAME *TELEPHONE NUMBER*

ADDRESS

3

NAME *TELEPHONE NUMBER*

ADDRESS

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

SIGNATURE OF APPLICANT

DATE

