

PERSONAL INFORMATION

EMPLOYMENT APPLICATION

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

T ENSON	L IIII OMINIATION						
Applicant Na	ame:				Date:		
Address:							
Telephone #	#: Social Security #:						
Email addres	S:						
Position of In	Position of Interest:				ne Part-time		
	Availability:						
	tations:						
Salary Expect	acions.		WINNESS CONTRACTOR				
Are you able	Are you able to meet the attendance requirements?				Yes No		
150	any objection to working				Yes — No —		
	er been previously employ				Yes No		
Can you submit proof of legal employment authorization and identity? If you are under 18, can you furnish a work permit if it is required?					Yes No		
	der 18, can you furnish a ver been convicted of a crin	N.*.	•		Yes No		
	explain (a conviction will			1.	Yes —— No ——		
	explain (a conviction viii	The tractor matrically	bar employment	/-			
	ng to submit to a criminal				Yes —— No ——		
	S. citizen? Yes No _						
How were yo	u referred to us?						
EDUCATIO	NAL HISTORY * Atta	ach transcripts (off	ficial preferred)				
/		-p					
	Name of School	Location	Dates of Attendance	Course of	Degree or credential received and date		
High School			Attendance	Study*	received and date		
High School							
College/							
University							
College/							
University							
Graduate							
School							

PROFESSIONAL LICENSES AND CERTIFICATIONS **Attach a copy of license/certification

Type of license/certification	Endorsements/Certifications**	Issuing Authority	Expiration Date
EMPLOYMENT HIS Please provide all employme	STORY nt information for your past four employers	beginning with the most recei	nt.
Address:		Telephone #:	
Immediate Supervisor an	d Title:		
Date Employed: from	to	Salary:	
Job Summary:		· · · · · · · · · · · · · · · · · · ·	
Reason for Leaving:			
Employer:		Position Held:	
	d Title:		
Date Employed: from	to	Salary:	
Job Summary:			
Reason for Leaving:			
Address:		Telephone #:	
Immediate Supervisor and	d Title:		and the second s
Date Employed: from	to	Salary:	
Job Summary:			
Reason for Leaving:			
	d Title:		
	to		
Job Summary:			
Doncon for Locuing			

PROFESSIONAL REFERENCES

Name	Telephone Number	Years Known	
Name	Telephone Number	Years Known	
Name	Telephone Number	Years Known	
CERTIFICATIONS			
I hereby authorize the potential employer to cor in this application from all previous employers, from liability the potential employer and its repr	educational institutions	, and references. I also hereby relea	se
to make employment decisions and all other per	sons or organizations fo	r providing such information.	
I understand that any misrepresentation or mate cause for cancellation of this application or whenever it may be discovered.			
If I am employed, I acknowledge that there is no not constitute an agreement or contract for emplete relationship at will, with or without cause, at or state law.	ployment. Accordingly, e	either the employer or I can termina	ite
of State law.			
Should I become an employee of Ascend/Navig and policies and conduct myself in an ethical and	\$ \$	will abide by their established terr	ns
understand that it is the policy of this organiza qualified individual with a disability because of equired by the ADA.			
also understand that if I am employed, I will b vork authorization within three days of being I hall result in immediate termination of employn	hired. Failure to submit		
represent and warrant that I have read and funder these conditions.	fully understand the for	egoing, and that I seek employme	nt

Applicant signature: ______ Date: _____

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