

EMPLOYMENT APPLICATION FORM

Application for Employment

Contact Info	armation					
	ormation	•				
Name:	Last		First		Middle	
Address:		Street	City		State	Zip
Telephone:	() Home		(Oth) er		
Email:						
Emergency:				()	
	Name			Phone	е	
Position App	plied For					
Job Title(s):						
Type of Empl		[]	(List al	I that apply)		[]
		Full-Time		Part-Time		Temporary
Desired Shift	:	[_] Day		[] Evening		[] Night
Available Sta	rt Date:					
Desired Salar	ry:					
Work Exper	ience (lis	st employers startin	g with the m	nost recent)		
Employer:						
Address:						
Telephone:	()	Street	City ()	State	Zip

I	Main Phone			
Supervisor:	Main Phone	Fax	()	
	Name & Title		Phone	
Employed Fr		to		
Desition Hole	(mm/dd/yy)		nm/dd/yy)	
Position Held	d:		Rate o <u>f Pay:</u>	
Primary Dut	ies:			
Reason for L	_eaving:			
Work Eyne	rience (list employers startir	ng with the most re	(cont)	
WOIR LAPO	rience (nst employers startin	ig with the most re	icent)	
Employer: _				
^				
Address:	Street	City	State	Zip
Telephone:		()		~·\P
•	Main Phone	Fax		
Supervisor:	Name & Title		()	
Franksynd Fr			Phone	
Employed Fr	rom: (mm/dd/yy)	to	ım/dd/yy)	
Position Held	J.		Rate o <u>f Pay:</u>	
1 001010111111	a: 			
Primary Dut	ies:			
Descap for I	and have			
Reason for L	_eaving:			
Work Expe	rience (list employers startir	na with the most re	cent)	
	, , , , , , , , , , , , , , , , , , , ,	-5		
Employer: _				
Address:				
Auuress.	Street	City	State	Zip
Telephone:	()	()		F
	Main Phone	Fax		
Supervisor:			()	
	Name & Title	to	Phone	
Employed Fr				

Position Held:	(mm/dd/yy)		(mm/dd/yy) Rate o <u>f</u> Pay:	
Primary Duties:				
Reason for Leaving:				
Work Experience	(list employers starting	a with the mo	st recent)	
	(
Address:				
	Street	City (State	Zip
Main) Phone	Fax	, ,	
Supervisor: Name	e & Title		() Phone	
Employed From: _	(mm/dd/yy)	to	(mm/dd/yy)	
Position Held:	(, aa, , , ,		Rate of Pay:	
Primary Duties: _				
Reason for Leaving:	:			
-				
Work Experience	(list employers starting	g with the mo	st recent)	
Employer:				
Address:				
Telephone: (Street	City	State	Zip
Main	Phone	Fax)	
Supervisor: Name	e & Title		(<u>)</u> Phone	
Employed From:	(mm/dd/yy)	to	(mm/dd/yy)	
Position Held:	(IIIII) (uu) yy)		Rate of Pay:	
Primary Duties:				

Reason for I	Lea	/ing <u>:</u>					
Education							
<u>Type of</u> <u>School</u>		Name of Sch	<u>ool</u>	Mailing Add	ress	<u>Years</u> <u>Completed</u>	<u>Diploma,</u> <u>Degree, and</u> <u>Major</u>
High School							
College							
Grad Schoo	I						
Other							
Office Skill	ls (d	office staff only)	-				
Typing	Ye No	s [] [] PM:		10-Key	Yes [No []	
Personal Computer	Ye No Mo	s[] [] del:		Software Applications (please list)	Word F Spread Other:	Processing: Isheet:	
Military							

Have you ever been in the armed forces?

Yes [] No []

Are you a me	ember of the National Guard?	Yes [] No []		
Military Spec	ialty:	Current Status:		
<u> </u>				
Other Skills	Or Experience (not included a	above)		
Personal Re	eferences (do not include relati	ives or previous emplo	yers)	
Name:	Last	First	Middle	
Address:	Street		State	7in
Telephone:	()	City ()	State	Zip
Occupation:	Home	Other	()	
	Company Name & Job Title		Phone	
Personal Re	eferences (do not include relati	ives or previous emplo	yers)	
Name:	Last	First	Middle	
Address:	Street	City	State	Zip
Telephone:	() Home	() Other		
Occupation:		Other	()	
	Company Name & Job Title		Phone	
Have you eve	er been convicted of a felony?	Yes [] No []		
If yes, explai				

KEU Form-KApplication

May we contact your current employer? Yes [] No []
Agreement
I authorize the investigation of all statements contained in this employment application form. I understand that, if I am hired, any misrepresentation or omission of facts by me is cause for immediate dismissal at any time. I hereby give Kairos Employment Unlimited, Inc. permission to contact any or all schools, previous employers (unless otherwise indicated), and references, and hereby release the Kairos Employment Unlimited, Inc. from any liability as a result of such contract.
I understand that Kairos Employment Unlimited, Inc. has a pre-employment drug and alcohol testing policy. Consent to and compliance with this policy is a pre-condition of my employment. I further understand that employment may be based on the successful passing of a job-related pre-employment physical examination.
I authorize Kairos Employment Unlimited, Inc. to request from a consumer reporting agency an investigative consumer report including information about my credit records. Upon written request from me, Kairos Employment Unlimited, Inc. will provide me with information concerning the nature and scope of any such report, as required by the Fair Credit Reporting Act.
I further understand that my employment with Kairos Employment Unlimited, Inc. is "at will," meaning it can be terminated at will for any reason and at any time by myself or by Kairos Employment Unlimited, Inc.
Signature of applicant: Date:
Kairos Employment Unlimited, Inc. is an equal employment opportunity employer.