

LA ASH, INC.

EMPLOYMENT APPLICATION

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, CREED, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB-RELATED MEDICAL CONDITION OR HANDICAP, AND ANY OTHER LEGALLY PROTECTED STATUS. IT IS OUR POLICY TO ABIDE BY ALL FEDERAL, STATE, AND LOCAL LAWS CONCERNING DISCRIMINATION IN EMPLOYMENT. NO QUESTION IN THIS APPLICATION IS INTENDED TO ELICIT INFORMATION IN VIOLATION OF ANY SUCH LAW NOR WILL ANY INFORMATION IN RESPONSE TO ANY QUESTION BE USED IN VIOLATION OF ANY SUCH LAW.

PERSONAL INFORMATION

NAME: _____ DATE OF APPLICATION: _____
Last First Middle

ADDRESS: _____ HOME PHONE: () _____

CITY, STATE, ZIP: _____ HOW LONG AT PRESENT ADDRESS? _____

HAVE YOU PREVIOUSLY BEEN EMPLOYED BY THIS ORGANIZATION? YES _____ NO _____
 IF YES, GIVE DATES _____

SOCIAL SECURITY NO: _____ DRIVERS LICENSE NO: _____

APPLYING FOR: FULL TIME _____ PART TIME _____ TEMPORARY _____ EXPECTED PAY: _____

EMERGENCY CONTACT: _____ PHONE: _____

ARE YOU WILLING TO WORK OVERTIME? _____ DATE AVAILABLE TO WORK: _____

ARE YOU EMPLOYED NOW? _____

EDUCATION AND TRAINING

SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	NO. OF YEARS COMPLETED	DID YOU GRADUATE	DIPLOMA OR DEGREE
HIGH SCHOOL					
COLLEGE OR UNIVERSITY					
COLLEGE OR UNIVERSITY					
TRADE SCHOOL					
APPRENTICE SCHOOL					

LIST ANY OTHER EDUCATION, TRAINING, SPECIAL SKILL OR CERTIFICATES THAT YOU POSSESS:

LIST ANY MACHINES OR EQUIPMENT THAT YOU ARE QUALIFIED AND EXPERIENCED AT:

EXPERIENCE

List Present and Former Employers beginning with most recent.

COMPANY NAME: _____ TYPE OF BUSINESS: _____ PHONE: _____

ADDRESS: _____ EMPLOYED (Month and Year)
From: _____
To: _____

NAME AND TITLE OF SUPERVISOR: _____

LIST LAST JOB TITLE AND DESCRIBE YOUR WORK: _____ WAGES:
Beginning: _____
Ending: _____

REASON FOR LEAVING: _____

COMPANY NAME: _____ TYPE OF BUSINESS: _____ PHONE: _____

ADDRESS: _____ EMPLOYED (Month and Year)
From: _____
To: _____

NAME AND TITLE OF SUPERVISOR: _____

LIST LAST JOB TITLE AND DESCRIBE YOUR WORK: _____ WAGES:
Beginning: _____
Ending: _____

REASON FOR LEAVING: _____

COMPANY NAME: _____ TYPE OF BUSINESS: _____ PHONE: _____

ADDRESS: _____ EMPLOYED (Month and Year)
From: _____
To: _____

NAME AND TITLE OF SUPERVISOR: _____

LIST LAST JOB TITLE AND DESCRIBE YOUR WORK: _____ WAGES:
Beginning: _____
Ending: _____

REASON FOR LEAVING: _____

SKILLS AND QUALIFICATIONS

HAVE YOU HAD ANY OTHER EXPERIENCES OR QUALIFICATIONS IN ADDITION TO THOSE INDICATED ABOVE WHICH RELATE TO THE JOB FOR WHICH YOU ARE APPLYING? IF SO PLEASE DESCRIBE:

REFERENCES

LIST BUSINESS PERSONS KNOWN, BUT NOT RELATED TO YOU, OTHER THAN LISTED ABOVE.

NAME	TITLE	BUSINESS	PHONE NO.	YEARS KNOWN

ADDITIONAL EMPLOYMENT - RELATED INFORMATION

CAN YOU VERIFY YOUR LEGAL RIGHTS TO WORK IN THE US BY PROVIDING A BIRTH CERTIFICATE, PROOF OF US CITIZENSHIP, OR BY SOME OTHER MEANS? YES ____ NO ____
(Proof of US Citizenship or immigration status is required upon employment)

IF YOU ARE UNDER 18 CAN YOU FURNISH A WORK PERMIT? YES ____ NO ____ N/A ____

ARE YOU ABLE TO PERFORM THE JOB(S) FOR WHICH YOU ARE APPLYING? YES ____ NO ____

HAVE YOU BEEN CONVICTED OF A CRIME IN THE PAST 7 YEARS, EXCLUDING MISDEMEANORS AND SUMMARY OFFENSES. YES ____ NO ____
IF YES, PLEASE DESCRIBE: _____

LIST PREVIOUS ADDRESSES DURING THE LAST FIVE YEARS

ADDRESS: _____
FROM: _____ TO: _____

ADDRESS: _____
FROM: _____ TO: _____

ADDRESS: _____
FROM: _____ TO: _____

