



EMPLOYMENT APPLICATION FORM

Application for Employment

Contact Information				
Name:	_____			
	Last	First	Middle	
Address:	_____			
	Street	City	State	Zip
Telephone:	()	()		
	Home	Other		
Email:	_____			
Emergency:	_____			
	Name	Phone		

Position Applied For			
Job Title(s):	_____		
	(List all that apply)		
Type of Employment:	[]	[]	[]
	Full-Time	Part-Time	Temporary
Desired Shift:	[]	[]	[]
	Day	Evening	Night
Available Start Date:	_____		
Desired Salary:	_____		

Work Experience (list employers starting with the most recent)				
Employer:	_____			
Address:	_____			
	Street	City	State	Zip
Telephone:	()	()		

Supervisor:	Main Phone _____	Fax _____	()
Employed From:	Name & Title _____	to _____	Phone _____
	(mm/dd/yy)	(mm/dd/yy)	
Position Held:	_____	Rate of Pay:	_____
Primary Duties:	_____		
Reason for Leaving:	_____		

Work Experience (list employers starting with the most recent)			
Employer:	_____		
Address:	_____		
	Street _____	City _____	State _____ Zip _____
Telephone:	() _____	() _____	
	Main Phone _____	Fax _____	
Supervisor:	_____		() _____
	Name & Title _____	Phone _____	
Employed From:	_____	to _____	
	(mm/dd/yy)	(mm/dd/yy)	
Position Held:	_____	Rate of Pay:	_____
Primary Duties:	_____		
Reason for Leaving:	_____		

Work Experience (list employers starting with the most recent)			
Employer:	_____		
Address:	_____		
	Street _____	City _____	State _____ Zip _____
Telephone:	() _____	() _____	
	Main Phone _____	Fax _____	
Supervisor:	_____		() _____
	Name & Title _____	Phone _____	
Employed From:	_____	to _____	

Position Held:	_____ (mm/dd/yy)	_____ (mm/dd/yy)	Rate of Pay: _____
Primary Duties:	_____		
Reason for Leaving:	_____		

Work Experience (list employers starting with the most recent)				
Employer:	_____			
Address:	_____	_____	_____	_____
	Street	City	State	Zip
Telephone:	(____)	(____)		
	Main Phone	Fax		
Supervisor:	_____			(____)
	Name & Title			Phone
Employed From:	_____	to	_____	
	(mm/dd/yy)		(mm/dd/yy)	
Position Held:	_____	Rate of Pay:	_____	
Primary Duties:	_____			
Reason for Leaving:	_____			

Work Experience (list employers starting with the most recent)				
Employer:	_____			
Address:	_____	_____	_____	_____
	Street	City	State	Zip
Telephone:	(____)	(____)		
	Main Phone	Fax		
Supervisor:	_____			(____)
	Name & Title			Phone
Employed From:	_____	to	_____	
	(mm/dd/yy)		(mm/dd/yy)	
Position Held:	_____	Rate of Pay:	_____	
Primary Duties:	_____			

Reason for Leaving: _____

Education				
<u>Type of School</u>	<u>Name of School</u>	<u>Mailing Address</u>	<u>Years Completed</u>	<u>Diploma, Degree, and Major</u>
High School				
College				
Grad School				
Other				

Office Skills (office staff only)			
Typing	Yes [] No [] WPM: _____	10-Key	Yes [] No []
Personal Computer	Yes [] No [] Model: _____	Software Applications (please list)	Word Processing: Spreadsheet: Other:

Military	
Have you ever been in the armed forces?	Yes [] No []

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.
