By proceeding with our application you acknowledge that you have read the Crescent Guardian Privacy Policy. Crescent Guardian is an equal opportunity employer. All applicants are considered for employment without regard to race, religion, sex, national origin, color, age, marital or veteran status, the presence of a non-job-related medical condition or physical handicap, or any other status protected by federal or state law.

Save the Employment History PDF to your computer, then submit it with your info on the <u>Pre-Employment form</u> online. Your application will be e-mailed to our office and our hiring manager will contact you in 3 - 5 business days.

Required fields are marked with a red asterisk *

Acknowledgements							
Agree to Acknowledgement and Consent *	Ye	S		No	Read Acknowledgement and Consent		
Agree to Background Check *	Αg	ree		Disagree			
Your Information							
First Name *		Middle Initial			Last Name *		
Street Address *							
City *	State *	Zip (Code *				
Email Address *	Phone * ()						
Previous Addresses							
Previous Address #1 *	Date from *		Date to *				
City	State *		Zip Code *				
Previous Address #2	Date from		Date to				
City	State		Zip Code				
Education							
High School Diploma or GED *	Ye	S		No			
Attend College *	Ye	S		No	If yes, how many years?		
What College Did you attend?					List any courses you are now taking		

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Work Experience							
Last or present employer *			Date from *	Date to *			
Employer Address *			State *	Zip Code *			
Supervisor Name and Title *							
Salary *							
Your position and basic duties *			Reason for leaving				
					<u> </u>		
Previous Employer #2			Date from	Date to			
Employer Address			State	Zip Code			
Supervisor Name and Title							
Salary							
Your position and basic duties					Reason for leaving		
Previous Employer #3			Date from	Date to			
Employer Address			State	Zip Code			
Supervisor Name and Title							
Salary							
Your position and basic duties					Reason for leaving		
U.S. Military Service							
Branch of service							
Honorable Discharge		Yes		No	Rank at discharge		
Give a brief description of special training	rece	eived or m	ost s	significant duty	I		
A 1 100 11 6 10							
Additional Information							
Position applying for *	—						
Welld Delivers Program #] _V		T	Olaka afilaana		
Valid Drivers license *	<u> </u>	Yes	_	No	State of Issue		
Use car to get to work *	1 '	Yes	ı	l No			

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