

# Application for Employment

Please complete all requested information.

Personal Information			
Last	First	MI	Email
Street Address	City	ST	Zip
			Phone <input type="checkbox"/> Home <input type="checkbox"/> Cell
If employment if offered, can you submit verification of your legal right work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you 18 or older? <i>If you are under 18, you may be required to submit a minor work permit.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please explain:	
Are you currently serving in the Military? <input type="checkbox"/> Yes <input type="checkbox"/> No	Branch	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	War
What position are you applying for?		How did you hear about this position?	
Expected Hourly Rate	Expected Yearly Salary	Date Available	

Prior Work or Volunteer Experience				
	Current or Most Recent		Prior	
Employer				
Address				
City, ST, ZIP				
Telephone				
Immediate Supervisor				
Dates of Employment	From	To	From	To
Position/Job Title				
Pay				
Reason for Leaving				
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Education							
	Name/Location	Last Year Complete				Degree	Major/Emphasis
High School		9	10	11	12		
College/University		1	2	3	4		
Trade School							
Other/Graduate							
List any relevant skills, training, or proficiencies.							

**Availability**

		Monday	Tuesday	Wednesday	Thursday	Friday
<b>For hourly/part-time employment</b> , please indicate the hours you are available to work. Please refer to the position description to affirm your availability for the required work schedule.	2PM					
	3PM					
	4PM					
	5PM					
	6PM					
	7PM					

**Professional References**

	Reference 1	Reference 2	Reference 3
Name			
Relationship			
Company			
Address			
City, State Zip			
Phone			
Email			

Disclaimer: By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.	
Signature	Date

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