

Application for Employment – please type or print

POSITION _____ DATE OF APPLICATION _____

NAME _____

ADDRESS _____

HOME PHONE _____ CELL _____ EMAIL _____

LAST FOUR DIGITS OF SOCIAL SECURITY # XXX-XX-____-____-____-____ STUDENT ID # _____

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? _____

ARE YOU CURRENTLY ENROLLED AS A STUDENT AT EDINBORO UNIVERSITY? _____

DATE AVAILABLE FOR WORK _____

HAVE YOU EVER PLEAD GUILTY OR BEEN CONVICTED OF A FELONY OR MISDEMEANOR? _____

IF YES, EXPLAIN: _____

EMPLOYMENT HISTORY – LIST LAST TWO EMPLOYERS, STARTING WITH THE MOST RECENT

1.	FROM	TO	EMPLOYER	TELEPHONE
	_____	_____	_____	_____
	JOB TITLE		ADDRESS	
	_____		_____	
	IMMEDIATE SUPERVISOR	SUMMARIZE NATURE OF WORK PERFORMED/ JOB RESPONSIBILITIES		
	_____	_____		
	REASON FOR LEAVING	STARTING AND ENDING HOURLY RATE		
	_____	_____		

2.	FROM	TO	EMPLOYER	TELEPHONE
	_____	_____	_____	_____
	JOB TITLE		ADDRESS	
	_____		_____	
	IMMEDIATE SUPERVISOR	SUMMARIZE NATURE OF WORK PERFORMED/ JOB RESPONSIBILITIES		
	_____	_____		
	REASON FOR LEAVING	STARTING AND ENDING HOURLY RATE		
	_____	_____		

SKILLS AND QUALIFICATIONS _____

<u>EDUCATION:</u>	NAME AND LOCATION	YEARS COMPLETED	DEGREE
HIGH SCHOOL	_____	_____	_____
COLLEGE	_____	_____	_____
OTHER	_____	_____	_____

- **YOU MUST ATTACH A LIST OF THREE REFERENCES (NAME, RELATIONSHIP, PHONE NUMBER AND YEARS KNOWN)**
- **YOU MUST ALSO ATTACH A LIST OF AVAILABILITY (TIMES YOU CAN WORK) OR A CLASS SCHEDULE IF YOU ARE A STUDENT**

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's services if I have been employed. I understand that I am free to resign at anytime and the employer reserves the right to terminate my employment at any time, with or without cause. I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

SIGNATURE OF APPLICANT _____ DATE _____