

Specialized Skills (Check Skills/Equipment Operated)

PC Excel Access MS Office Word Calculator
 Fax Register Lotto/Lottery Machine other _____

EMPLOYMENT:

Please provide the information requested below starting with your current, or most recent job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Can we contact your current employer? Yes No

Company Name: _____ Phone: () _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting rate of pay: _____ Ending rate of pay: _____
 Employment dates: From _____ To _____ Reason for leaving: _____
 Description of duties: _____

Company Name: _____ Phone: () _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting rate of pay: _____ Ending rate of pay: _____
 Employment dates: From _____ To _____ Reason for leaving: _____
 Description of duties: _____

Company Name: _____ Phone: () _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting rate of pay: _____ Ending rate of pay: _____
 Employment dates: From _____ To _____ Reason for leaving: _____
 Description of duties: _____

Company Name: _____ Phone: () _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting rate of pay: _____ Ending rate of pay: _____
 Employment dates: From _____ To _____ Reason for leaving: _____
 Description of duties: _____

If you need additional space, please continue on a separate sheet of paper

List professional, trade, business or civic activities and offices held. You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

OTHER QUALIFICATIONS:

Summarize special job-related skills and qualifications acquired from employment or other experience.

REFERENCES (not relatives):		
Name	Address	Phone Number
_____	_____	_____
_____	_____	_____

APPLICANT'S STATEMENT:

I certify that answers given herein, are true and complete.

I understand that the company will thoroughly investigate my work and personal history and verify all data given on this application, on related papers and in interviews. I authorize all individuals, schools and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information. I authorize the company to secure records regarding my criminal conviction history from the appropriate law enforcement agencies.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, and employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that any false or misleading statement made by me in connection with this application or interview(s) or the failure to disclose any material information will be grounds for immediate dismissal. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature _____ Date: _____

Applications become inactive after 45 days. If you wish to be considered after that time, you must complete a new application