



# Education

	Elementary School					High School				Undergraduate College/University				Graduate/ Professional			
School Name and Location																	
Years Completed	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Describe Course of Study																	
State any additional information you feel may be helpful to us in considering your application.																	

List professional, trade, business or civic activities, and offices held.

You may exclude membership which would reveal sex, race, religion, national origin, age, color, disability, marital or other protected status:


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

## Special Skills and Qualifications

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


# Employment Experience

**ALL APPLICANTS MUST COMPLETE ENTIRE APPLICATION.**

After completion of application, resume may be attached.

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You are not required to include organizations which indicate race, color, religion, sex, national origin, age, disability, marital, or other protected status. List employment for the last ten (10) years. Any gaps in employment must be explained. Example: attend school, stay at home, etc.

<b>1.</b>	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)		Hourly Rate/Salary	
	Job Title	Supervisor	Starting	Final
Reason for leaving				
<b>2.</b>	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)		Hourly Rate/Salary	
	Job Title	Supervisor	Starting	Final
Reason for leaving				
<b>3.</b>	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)		Hourly Rate/Salary	
	Job Title	Supervisor	Starting	Final
Reason for leaving				
<b>4.</b>	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)		Hourly Rate/Salary	
	Job Title	Supervisor	Starting	Final
Reason for leaving				
<b>5.</b>	Employer	Dates Employed		Work Performed
		From	To	
	Address			
	Telephone Number(s)		Hourly Rate/Salary	
	Job Title	Supervisor	Starting	Final
Reason for leaving				

## References

List three people to whom we may refer. Omit relatives and former employers.

NAME	ADDRESS	PHONE NO.
1.		
2.		
3.		

## Miscellaneous

Are you presently employed?  Yes  No

Are you presently on layoff status?  Yes  No

Have you ever been discharged or requested to resign?  Yes  No

May we communicate with your present employer?  Yes  No

### **IMPORTANT – PLEASE READ BEFORE SIGNING**

I understand that as a condition of employment I may be subject to drug screening, as well as periodic random drug testing, should I be employed.

I understand, if selected for employment, I will be required to submit verification of legal right to work in the United States.

I agree that, should I be employed, such employment shall be subject to satisfactory work performance. If CSI finds that I am not adapted to the work, or am otherwise not satisfactory, my employment will be terminated. I also agree to be subject to the established rules and regulations governing Concerted Services, Inc.'s Personnel Policies and Procedures.

I understand and agree that in processing this employment application, I may be required to submit to a criminal investigation check.

I hereby certify that the answers given by me to all questions on this application are true and correct to the best of my knowledge and belief and that I have not knowingly withheld any facts or circumstances that might, if disclosed, affect my application unfavorably. I understand that failure to do so may result in immediate termination if employed.

I hereby acknowledge that I read the foregoing disclosure and understand the same.

**SIGNATURE OF APPLICANT** \_\_\_\_\_

**DATE** \_\_\_\_\_