

AUGUSTA RECREATION COMMISSION

Employment Application

APPLICANT INFORMATION															
Last Name					First				M.I.		Date				
Street Address									Apartment/Unit #						
City					State				ZIP						
Phone					E-mail Address										
Date Available					Social Security No.				Desired Salary						
Position Applied for															
Are you a citizen of the United States?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>		NO <input type="checkbox"/>	
Have you ever worked for this company?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?							
Have you ever been convicted of a felony?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain							
EDUCATION															
High School					Address										
From			To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree				
College					Address										
From			To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree				
Other					Address										
From			To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree				
REFERENCES															
<i>Please list three professional references.</i>															
Full Name							Relationship								
Company							Phone								
Address															
Full Name							Relationship								
Company							Phone								
Address															
Full Name							Relationship								
Company							Phone								
Address															

PREVIOUS EMPLOYMENT			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date