

EMPLOYMENT APPLICATION

HUMAN RESOURCE DEVELOPMENT FOUNDATION, INC.
HUMAN RESOURCE DEVELOPMENT & EMPLOYMENT, INC.
1644 MILEGROUND
MORGANTOWN, WEST VIRGINIA 26505

(Print or Type)

Date _____

Position applying for _____ Rate of pay expected \$ _____

Name _____ Phone Number _____

Street _____ City _____ State _____ Zip _____

Date available for work _____

Would you like: Full-Time _____ Part-Time _____ Specify days and hours if interested in part-time work _____

Were you previously employed by us? _____ If yes, when? _____

NOTE: The next two questions are applicable only to positions which require a vehicle as an essential job function.

Do you own a vehicle? _____ Make _____ Year _____

Will you have daily access to this vehicle for the performance of your job duties? _____

List any friends or relatives working for us _____

Relationship _____

EDUCATION	DEGREE
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High School _____

College _____

Other Training _____

Have you ever been bonded? _____ If yes, on what job? _____

Type of work desired? _____

Briefly state reasons for this type of work: _____

Special skills or machines operated: _____

Summary of work experience: _____

LIST WORK HISTORY IN CHRONOLOGICAL ORDER WITH THE MOST RECENT JOB FIRST

I. Employer _____ Address _____
Name of Supervisor _____
Description of Work _____

Starting Salary _____ Highest Salary _____
From _____ To _____
Month Year Month Year
Reason for Leaving _____

II. Employer _____ Address _____
Name of Supervisor _____
Description of Work _____

Starting Salary _____ Highest Salary _____
From _____ To _____
Month Year Month Year
Reason for Leaving _____

III. Employer _____ Address _____
Name of Supervisor _____
Description of Work _____

Starting Salary _____ Highest Salary _____

From _____ To _____
Month Year Month Year

Reason for Leaving _____

LIST AT LEAST THREE REFERENCES (NO RELATIVES)

1. Name _____ Address _____
Phone Number _____ Occupation _____
2. Name _____ Address _____
Phone Number _____ Occupation _____
3. Name _____ Address _____
Phone Number _____ Occupation _____

MILITARY STATUS

Draft Classification _____ Local Board No. _____

Address _____ City and State _____

Present classification _____

Are you a member of a Military Reserve or National Guard? YES _____ NO _____

ADDITIONAL COMMENTS

Applicant's Certification - Please read carefully before signing.

I certify that the answers given by me to the foregoing questions and the statements made by me in this application are correct and complete. I understand that, if I become employed, a misrepresentation or omission of fact in this application may result in my discharge from employment. I authorize the Company, as part of its evaluation of my suitability for employment, to contact all school officials, references, and my previous supervisors to secure information concerning my skills, character and ability.

Applicant's Signature

Date