APPLICATION FOR EMPLOYMENT

3724 Lakeside Drive Suite 200 Reno, NV 89509



PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

POSITION(S) APPLIED FOR				DATE OF APPLICA	ATION//	
NAME		FIRST	MIDDLE	SOCIAL SECURITY #		
ADDRESS	STREET		CITY	STATE	710	CODE
TELEPHONE # ()		EEPER / OTHER # ()				
REFERRAL SOURCE (HOW DID YOU H	HEAR ABOUT US?)					
If you are under 18, and it is required,	can you furnish a work	permit?			🗆 Yes	🗌 No
If no , please explain						
Have you ever been employed here be						🗌 No
Are you legally eligible for employment					_	🗌 No
Date available for work	-					
Type of employment desired	Full-Time	Part-Time	Temporary	Seasonal	Educational	al Co-Op
Driver's license number if driving may						
Answering "yes" to the following quantum of the violation, rehabilitation	lestions does not col	nstitute an automatic bar	to employment. Facto			d
Have you ever pled "guilty" or "no cont	est" to, or been convict	ed of a crime?				🗌 No
If yes, please provide date(s) and deta	uls					

EMPLOYMENT HISTORY

Starting with your most recent employer, provide the following information.

	0							
EMPLOYER	TELEPHONE		DATES EMPLOYED	MONTH /	YEAR TO	MONTH	/ YEAR	
STREET ADDRESS	CITY	STATE		COMPE	NSATION (STARTING			
			HOURLY	SALARY	\$		PER	
STARTING JOB TITLE/FINAL JOB TITLE			COMMISSION / BONU		ISATION \$			
IMMEDIATE SUPERVISOR AND TITLE (FOR MOST RECENT POSITION HELD)	1	MAY WE CONTACT FOR REFERENCE?			PENSATION (FINAL)			
		U YES NO L LATER	HOURLY	SALARY	\$	-	PER	
WHY DID YOU LEAVE?			COMMISSION/BONUS					_
SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES.								_
WHAT DID YOU LIKE MOST ABOUT YOUR POSITION?								
WHAT WERE THE THINGS YOU LIKED LEAST ABOUT THE POSITION?								
EMPLOYER	TELEPHONE			MONTH /	YEAR	MONTH	/ YEAR	-
	()		DATES EMPLOYED	/	TO		/	_
STREET ADDRESS	CITY	STATE		COMPE	NSATION (STARTING			
STARTING JOB TITLE/FINAL JOB TITLE				SALARY	\$		PER	
			COMMISSION / BONU	S / OTHER COMPEN	ISATION \$			
IMMEDIATE SUPERVISOR AND TITLE (FOR MOST RECENT POSITION HELD)	1	MAY WE CONTACT FOR REFERENCE?		COMF	PENSATION (FINAL)			
WHY DID YOU LEAVE?		YES NO LATER	HOURLY	SALARY	\$		PER	
WHY DID YOU LEAVE?			COMMISSION/BONUS	OTHER COMPENSA	ATION \$			
SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES.								
WHAT DID YOU LIKE MOST ABOUT YOUR POSITION?								
WHAT WERE THE THINGS YOU LIKED LEAST ABOUT THE POSITION?								
EMPLOYER	TELEPHONE			MONTH /	YEAR	MONTH	/ YEAR	-
	()		DATES EMPLOYED	1	ТО		/	
STREET ADDRESS	CITY	STATE		COMPE	NSATION (STARTING			
STARTING JOB TITLE/FINAL JOB TITLE			HOURLY	SALARY	\$		PER	
			COMMISSION / BONU					
IMMEDIATE SUPERVISOR AND TITLE (FOR MOST RECENT POSITION HELD)	'	MAY WE CONTACT FOR REFERENCE?		COMF	PENSATION (FINAL)			
WHY DID YOU LEAVE?			HOURLY	SALARY	\$		PER	
			COMMISSION/BONUS	OTHER COMPENSA	ATION \$			
SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES.								
WHAT DID YOU LIKE MOST ABOUT YOUR POSITION?								_
WHAT WERE THE THINGS YOU LIKED LEAST ABOUT THE POSITION?								_

SKILLS AND QUALIFICATIONS

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)					
Word Processing	_Years:	E-mail	Years:		
Spreadsheet	Years:	Internet	Years:		
Presentation	_Years:	□ Other	Years:		

EDUCATIONAL BACKGROUND

Starting with your most recent school attended, provide the following information.

School (Include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		Diploma GED		
		Degree		
		Certification		
		Other		
		Diploma GED		
		Degree		
		Certification		
		Other		
		Diploma GED		
		Degree		
		Certification		
		Other		

REFERENCES

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If applicable, list three school or personal references who are not related to you.

NAME	TITLE	RELATIONSHIP TO YOU	TELEPHONE		NUMBER OF YEARS KNOWN
			()	
			()	
			()	

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.