

List professional, trade, business or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex or national origin): _____

Give name, address, and telephone number of three references who are not related to you and are not previous employers.

- 1) _____
- 2) _____
- 3) _____

EDUCATION	ELEMENTARY	HIGH SCHOOL	UNIVERSITY	GRADUATE
School Name				
Years Completed (Circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				

Describe specialized training, apprenticeship, skills, and extra-curricular activities	Name: Location: Length of Course: Was Course Completed: Subject: General:
	Honors:

Employment Experience:

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names, which indicate, for example, race, color, religion, sex, or national origin.

1. Employer: _____
 Address: _____ Telephone: () _____
 Job Title: _____ Supervisor: _____
 Dates Employed: _____ Hourly Rate/Salary: _____
 Reason for Leaving: _____
 Work Performed: _____
2. Employer: _____
 Address: _____ Telephone: () _____
 Job Title: _____ Supervisor: _____
 Dates Employed: _____ Hourly Rate/Salary: _____
 Reason for Leaving: _____
 Work Performed: _____
3. Employer: _____
 Address: _____ Telephone: () _____
 Job Title: _____ Supervisor: _____
 Dates Employed: _____ Hourly Rate/Salary: _____
 Reason for Leaving: _____
 Work Performed: _____

State any additional information you feel may be helpful to us in considering our application: _____

These answers are true and complete to the best of my knowledge. The Home may investigate all statement contained in this application, and I understand that any false or misleading information provided my result in my immediate discharge. I understand that this application is not a contract of employment and that if hired, regardless or any oral representations to the contrary, the employment relationship between myself and the Home is terminable-at-will. Any changes in this employment relationship must me bade in writing.

I also understand that any offer of employment is conditioned upon a health evaluation by a doctor selected by the Home; to determine weather I can perform the job duties. I specifically authorize, as part of the physical examination, a test for drugs and alcohol.

Additionally, I authorize the Home to supply my employment record, in its sole discretion, in whole or in part, to any prospective employer, government agency, or other party with an interest that the Home deems appropriate.

Signature of Applicant

Date

PLEASE WRITE A PARAGRAPH EXPLAINING WHY YOU WOULD LIKE TO BE EMPLOYED AT THE PERRY LUTHERAN HOME: