



APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available		Desired Salary	
Position Applied for			Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
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"/>
Do you have a valid NYS Driver's License?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, explain	
Is your driver's license in good standing?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, please explain on the last page of the application.	
Do you have any points on your license?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, please explain on the last page of the application.	

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 <u>two professional</u> references and <u>one personal</u> reference.</i>	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

**Please Fill Out Reverse Side of Application**



PREVIOUS EMPLOYMENT			
Company		Phone ( )	
Address		Supervisor	
Job Title			
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			
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			
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	
<p>I hereby certify that all statements made in this application are true and complete. I understand that any falsification or misrepresentation of this information will disqualify my application from further consideration for employment. Further, if employment is granted by Human First and it is determined at a later date that the information provided herein is deemed false or misleading it will be grounds for immediate termination.</p>	
Signature	Date



**APPLICABLE TRAINING**

Do you have any current Valid Certificates of Professional or Vocational Competence? Licenses and Expiration Dates, membership in Professional Associations. (Include dates of completion if applicable)

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**SKILLS**

Special Skills, Accomplishments and Awards (list your special skills you may have that may be pertinent to this job i.e., skills with machines, publications written, public speaking and/or writing experience, membership in any other associations not mentioned previously, etc.)

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**LANGUAGE**

Do you speak or read any other language other than English? Yes\_\_\_ No\_\_\_ Sign Language? Yes\_\_\_ No\_\_\_

Language:\_\_\_\_\_ Verbal Fluency\_\_\_\_\_ Written Fluency\_\_\_\_\_

Language:\_\_\_\_\_ Verbal Fluency\_\_\_\_\_ Written Fluency\_\_\_\_\_

**Please Fill Out Reverse Side of Application**



**DRIVING STIPULATION STATEMENT**

Please provide accurate and complete information to the following in accordance to your Driving history:

- List all moving violations that have occurred in the last three years:

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- Suspensions: \_\_\_\_\_
- Revocations: \_\_\_\_\_
- DWI's \_\_\_\_\_
- Conviction: \_\_\_\_\_

- Any occurrences involving harm to any one or property?

If so, please explain:

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**CERTIFICATION OF APPLICANT - READ CAREFULLY BEFORE SIGNING**

I hereby certify, that all statements made in this application are true and complete. I also understand that any falsification or misrepresentation of this information will disqualify my application from further consideration for employment.

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date