

Employment Application

Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.	Date of Review ____/____/____
How were you referred to us:	Position Applied for:

APPLICANT DATA

Full Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell Phone: _____ Email: _____

Date Available to Start: _____ Salary Requirement: _____

Have you ever worked for Hidden Lane? Yes No

Are you legally authorized to work in the United States? Yes No

Type of employment desired: Full-Time Part-Time Temporary Seasonal

Have you ever pleaded “guilty,” “no contest,” or been convicted of a crime? Yes No

If yes, give dates and details: _____

Answering “yes” to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitative, and position applied for will be considered.

SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS:

PREVIOUS EMPLOYMENT (Begin with most recent position):

Dates of Employment:	From: __/__/__	To: __/__/__	Position:	_____
Firm:			Address:	_____
Phone: ()	Supervisor:	Title:		_____
Responsibilities:				
Starting Salary and Title:		Ending Salary and Title:		
Reason for Leaving:				
May we contact this employer for a reference?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Dates of Employment:	From: __/__/__	To: __/__/__	Position:	_____
Firm:			Address:	_____
Phone: ()	Supervisor:	Title:		_____
Responsibilities:				
Starting Salary and Title:		Ending Salary and Title:		
Reason for Leaving:				
May we contact this employer for a reference?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Dates of Employment:	From: __/__/__	To: __/__/__	Position:	_____
Firm:			Address:	_____
Phone: ()	Supervisor:	Title:		_____
Responsibilities:				
Starting Salary and Title:		Ending Salary and Title:		
Reason for Leaving:				
May we contact this employer for a reference?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, and other matters as may be necessary for an employment decision. I hereby release employers, schools, or individuals from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ Date: _____