

Job Applicant Information

Applicant Name Home Phone Social Security # Email Address Current Address	<u></u>				
City				_	
State & Zip					
Availability:					
What hours are you	u availabl	e each day?	•		
M T	W	R	F	S	
How many total ho	urs per w	eek are you	ı able to w	ork?	
Education, Tr	aining	and Exp	erience)	
High School: School name: School city, state:_ Year of graduation					
College / Univers School name: School city, state:_	-				ranscripts)
Number of years co					

Degree / diploma earned: _____

Do you have any other experience, training, qualifications, or skills?

Have you ever been convicted of a criminal offense (felony or misdemeanor)? [] Y or [] N

If yes, please describe the crime - state nature of the crime(s), when and where convicted and disposition of the case.



Employment History

Name of Employer:	
Name of Supervisor:	
Telephone Number:	
Business Type:	
Address:	
City, state, zip:	
Length of Employment (Include Dates):	_
Position & Duties:	
Reason for Leaving:	
May we contact this employer for references? [] Y or [] N	
Name of Employer:	_
Name of Supervisor:	
Telephone Number:	
Business Type:	
Address:	
City, state, zip:	
Length of Employment (Include Dates):	_
Position & Duties:	
Reason for Leaving:	
May we contact this employer for references? [] Y or [] N	
Name of Employer:	
Name of Supervisor:	_
Telephone Number:	
Business Type:	—
Address:	
City, state, zip:	
Length of Employment (Include Dates):	
Position & Duties:	_
Reason for Leaving:	

May we contact this employer for references? [] Y or [] N



References

Name - First, Last:	
Telephone Number:	
Address:	
City, state, zip:	
Number of Years Acquainted:	
Name - First, Last:	
Telephone Number:	
Address:	
City, state, zip:	
Number of Years Acquainted:	
Name - First, Last:	
Telephone Number:	
Address:	
City, state, zip:	
Number of Years Acquainted:	

Please Read and Initial Each Paragraph, then Sign Below

I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure can be grounds for rejection of application or, if I am employed by Kid Stop, terms for my immediate expulsion from the company.

I understand that if I am employed, my employment is not definite and can be terminated at any time either with or without prior notice, and by either me or Kid Stop.

I permit Kid Stop to examine my references, record of employment, education record, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release Kid Stop, my former employers & all other persons, corporations, partnerships & associations from any & all claims, demands or liabilities arising out of or in any way related to such examination or revelation.

Applicant's Signature:_____

Date: