APPLICATION FOR EMPLOYMENT

BENEDICTINE SISTERS OF PERPETUAL ADORATION

Clyde, MO

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

PLEASE PRINT CLEARLY

Position (s) Applied For	Date of Application		
Last Name	First Name	Middle Name	
Address – Street Number	City, State, ZIP		
Telephone	Social Security Number		
Home:			
Cell:			
Are you 18 years or older Yes No			
Have you ever applied for a position with this company	before Yes No	If yes, give date	
Have you ever been employed with us before? Yes No If yes, give date			
Are you currently employed? Yes No			
Are you prevented from lawfully becoming an employe Status? Yes No (proof of citizenship or immig	-	-	
On what date would you be available to work?			
Are you available for full-time work? Yes No	What hours are you avail	able?	
Have you been convicted of a felony Yes No (Conviction will not necessarily disqualify an applicant form employment) If yes, please explain)			

EMPLOYMENT (please give accurate, complete full-time & part-time employment record. Start with your present or most recent employer)

Company Name:	Telephone:	
Address	Dates employed (month and year)	
	From: To:	
Job title/description	Reason for Leaving	
Company Name:	Telephone:	
Address	Dates employed (month and year)	
	From: To:	
Job title/description	Reason for Leaving	
Company Name:	Telephone:	
Address	Dates employed (month and year)	
	From: To:	
Job title/description	Reason for Leaving	

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

May we contact your present employer? Yes_____ No_____

(Please exclude relatives and employers from references)

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT ANY FALSE INFORMATION ON THIS APPLICATION MAY BE GROUNDS FOR NOT HIRING ME.

DATE______SIGNATURE______