Region 8 Mental Health Commission

Position Applying For:

Application For Employment

S F F A A L	Have you ever inter Yes No Are you legally elighted Are you related to a	rviewed with us? If Yes, please give dates: gible for employment in the United States: any current/former Region 8 employee?	Middle Init	Home To Busines Social	Security Number	YY) 	
P	City, State, Zip Have you ever been Have you ever inter Yes No Are you legally elighted to a	rviewed with us? If Yes, please give dates: gible for employment in the United States:		Busines Social S Pay Exp	ss Telephone Security Number		
P E H F F F F F F F F F F F F F F F F F F	Have you ever been Have you ever inter Yes No Are you legally elign Are you related to a	rviewed with us? If Yes, please give dates: gible for employment in the United States:		Social S Pay Exp	Security Number		
R S F O A A A A A	Have you ever inter Yes No Are you legally elighted Are you related to a	rviewed with us? If Yes, please give dates: gible for employment in the United States:		Pay Exp	-		
S H O N A L A	Yes No Are you legally elig Are you related to a	If Yes, please give dates: gible for employment in the United States:			pected		
N A L	Are you legally elig	gible for employment in the United States:		W:11 W	Pay Expected		
$\begin{array}{c c} \mathbf{A} & \stackrel{f}{\longrightarrow} \\ \mathbf{L} & \stackrel{f}{\longrightarrow} \end{array}$	Are you related to a			XX7:11 X7 -			
F	-	any current/former Region 8 employee?			Will You Work Overtime If Asked?		
	-			Yes When V	Yes No When Will You Be Available To Work		
_		If Yes, Please give name and relationship					
(Other special training or skills (languages, machine operation, etc.)						
E	School	Name and Location of School	Course of Study	No. of Years Completed	Did You Graduate?	Degree or Diploma	
U I	High School						
C A	College						
T	Graduate						
O N	Business/ Trade/ Technical						
How m	nany normal worki	ng hours are your currently working?					
	you ever been conv you ever been charş	ricted of a crime other than a speeding ticke ged with a felony? yes no	et? yes no				
	Memb	pership in Professional or Civic Orga	anizations, Professions	al Licenses or Cei	rtifications		
		(Exclude those which may disclos					

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, or national origin, handicap, veteran status or sexual orientation.

EMPLOYMENT			Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer		
	Company Name		Telephone		
	Address		Employed – (State Month and Year) From To		
1	Name of Supervisor		Weekly Pay Start Last		
	State Job Title and Describe Your Wor	k	Reason for Leaving		
	Company Name		Telephone		
_	Address		Employed – (State Month and Year) From To		
2	Name of Supervisor		Weekly Pay Start Last		
	State Job Title and Describe Your Wor	k	Reason for Leaving		
	Company Name		Telephone		
	Address		Employed – (State Month and Year) From To		
3	Name of Supervisor		Weekly Pay Start Last		
	State Job Title and Describe Your Wor	k	Reason for Leaving		
	Company Name		Telephone		
4	Address		Employed – (State Month and Year) From To		
	Name of Supervisor		Weekly Pay Start Last		
	State Job Title and Describe Your Work		Reason for Leaving		
We	may contact the employers				
liste	ed above unless you indicate	DO 1	NOT CONTACT		
	se you do not want us to tact.	Employer Number(s)			
contact.		Reason			

MILITARY U.S. Armed Forces? Yes No Branch? Describe any training received relevant to the position for which you are applying. Are you 18 years of age or older? Yes No Do you have a Commercial Driver's License? Yes No Please list 5 references in the space provided below who can speak to your work history 1 2 3 4			Did you serve in the			If "YES", in what
Are you 18 years of age or older? Yes No Do you have a Commercial Driver's License? Yes No Please list 5 references in the space provided below who can speak to your work history 1 2 3 4			U.S. Armed Forces?	Yes	No	Branch?
Do you have a Commercial Driver's License? Yes No Please list 5 references in the space provided below who can speak to your work history	Desc	cribe any training received rele	vant to the position for w	hich you ar	e applying.	
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Please list 5 references in the space provided below who can speak to your work history 1 2 3 4						
Please list 5 references in the space provided below who can speak to your work history 1 2 3 4	Do y	you have a Commercial Driver	's License? Yes	No		
REFERENCES history 1 2 3 4	Do	ou have a commercial briver	b License.	110		
1 2 3 4 4 A A A A A A A A A A A A A A A A A	D.E.	Please list	5 references in the space	provided be	elow who c	an speak to your work
2 3 4	RE	FERENCES history				
2 3 4	4					
3 4	1					
3 4						
3 4	2					
4	4					
4						
4	3					
	J					
5	4					
5						
5						
	5					
The information provided in this Application of Employment is true correct, and complete If		The information provided in t	his Application of Emplo	rmant is to	ua aarraat	and complete. If
The information provided in this Application of Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.	a					
I understand that acceptance of an offer of employment does not create a contractual obligation upon the		tractual obligation upon the				
employer to continue to employ me in the future.						
A If you decide to engage an investigative agency to report on my credit and personal history, I authorize		If you decide to engage an inv	vestigative agency to reno	ort on my cr	edit and ne	ersonal history. Lauthorize
you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may		•		•		•
obtain from them the nature and substance of the information contained in the report.						
\mathbf{R}						
E						
Date Signature		Date	Sign	nature		

FOR EMPLOYERS USE ONLY

	Employer	Person Contacted	Results
R E F E	1		
R E N C	2		
E	3		
H E C K	4		
	5		

I	Interviewer Name and Comments
I N T E R V	
I E W	
R E S	
RESULTS	