

EMPLOYER 2: _____

Business Phone No: _____

Supervisor's Name: _____

May we contact them? Yes No

Starting Date: _____ Leaving Date: _____

Starting Salary: _____ Ending Salary: _____

EMPLOYER 3: _____

Business Phone No: _____

Supervisor's Name: _____

May we contact them? Yes No

Starting Date: _____ Leaving Date: _____

Starting Salary: _____ Ending Salary: _____

Have you ever been fired? Yes No If Yes, please explain: _____

EDUCATION HIGH SCHOOL / G.E.D.

Attended: Yes No Graduated? Yes No Year of Completion/ Expected to complete: _____

COLLEGE / UNIVERSITY / TECHNICAL / VOCATIONAL

Attended: Yes No Graduated? Yes No Year of Completion/ Expected to complete: _____

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW

If you have any questions regarding the following statements, please ask for assistance.

I declare that I am qualified to perform all the duties of the position I am seeking. I also declare that the information I have provided on this application is true and correct and that any false statements or omissions will justify my rejection or dismissal. I authorize **YC's** to (1) contact any of my previous employers as well as any reference source to verify the facts and information that I have furnished regarding my qualifications and my character; (2) obtain convictions; (3) obtain information from educational institutions concerning my educational record, conduct, and skills; and (4) obtain information concerning my credit history from credit reporting agencies, financial institutions, and other sources.

I authorize any person(s) having knowledge to provide such information to **YC's** and release from liability and agree to hold harmless any person that furnishes such information in good faith. If I am employed, I agree to abide by rules, procedures, and policies as modified from time to time, including any drug-free work place policies.

If employed by **YC's** I understand that I will be an employee at will and that **YC's** or myself may terminate at my employment with **YC's** at anytime for any reason whatsoever. I understand that no supervisor or manager may alter or amend the above conditions. Only the owner of **YC's** has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.

If I am employed, I understand that I will be asked to sign a Federal I-9 form and to provide positive proof of my identity and verification of my right to live and work in the United States. Finally, I understand that this is not only an application for employment and an offer of nor contract of employment and no part of this application shall be construed as an offer of employment or an employment contract.

Applicant's Signature _____

Printed Name _____

Date _____