



Date Received: _____

Personal Information			
Last Name	First Name	Middle Name	Today's Date
Street Address		City	State Zip Code
<i>*If you haven't lived at this address for the last 5 years, please include any/all addresses for the last 5 years on the back of this page.</i>			
Home Phone: (____) _____ - _____		Are you a United States Citizen or legally eligible to work in the U. S.? ____Yes ____No <i>(If hired, you will be required to provide documentation that you are eligible to work in the U.S.)</i>	
Work Phone: (____) _____ - _____			
E-Mail: _____			
Are you 18 or over? ____Yes ____No			
Title of Position Applying For:			Date Available to Work:
Desired rate of pay:			
Do you have any relatives currently working for the Cassel Care? ____Yes ____No If Yes, list names and relationship to you:			
Are you employed now?		If so, may we contact your present employer?	

Education				
	Name and Location	# Years Completed	Major Area of Study	Degree/Diploma
High School				
College				
Graduate School				
Technical or Certificate Programs				

Employment History Please provide the following information for your previous three employers, beginning with the most recent: (Please attach an additional page if necessary, **do not use "see attached resume".**)

Employer:	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

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Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
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Address:		
Telephone:	Job Duties:	
Weekly Pay Start: Finish:		
Reason for Leaving:		

Describe your qualifications for the type of employment you are seeking (*Please include skills, special training, etc.*):

Please list your availability:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Start Time							
End Time							

References Please list names of supervisors, managers, or others who can comment directly on your abilities:				
Name	Address	Phone #	Relationship/Occupation	Years Known

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if employed, false statements on this application shall be considered sufficient cause of dismissal. You are hereby authorized to make investigation of my personal references.

Applicant Name Printed: _____

Applicant Signature: _____ Date: _____