



Employment Application

PREVENT • TREAT • RECOVER

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Are you authorized to work in the United States? YES NO
 Date Available: _____

Have you ever applied for a position or worked for this company? YES NO
 If yes, when? _____

Do you have any relatives that work for this company? YES NO
 If yes, who? _____

What position/s are you applying for? _____

Education

High School/ Equivalent: _____ City and State: _____

Did you graduate? YES NO Diploma: _____

College: _____ City and State: _____

Did you graduate? YES NO Degree: _____

Other: _____ City and State: _____

Did you graduate? YES NO Degree: _____

Employment History

Begin with current or most recent employment:

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your current/previous supervisor for a reference? YES NO

Employment History

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO
May we contact your current/previous supervisor for a reference?

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
YES NO
May we contact your current/previous supervisor for a reference?

Professional References

Please provide three professional, preferably supervisory, references that have known you for at least one year.
Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.
By providing contact information for my professional references, I authorize ASAC to obtain any information that is available concerning my employment and/or education. I likewise release these references from any liability for damages arising from the information furnished to the requesting party.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

ASAC provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability or genetics. In addition to federal law requirements, ASAC complies with applicable state and local laws governing nondiscrimination in employment.