



Application for Employment

Last Name _____ First Name _____

Date of Application ____ / ____ / ____ Requested Start Date ____ / ____ / ____

Position Sought: _____ Part Time

How did you learn about the position? _____

Home Address _____

City _____ State _____ Zip _____

Primary Phone _____ Work Phone _____

Other Phone _____ Email Address _____

Social Security Number _____ - _____ - _____

Birth Date ____ / ____ / ____

Are you able to perform the essential functions for this position? Yes No

If no, describe the functions that cannot be performed: _____

(Note: CariNet complies with the ADA and considers reasonable accommodations that may be necessary for eligible applicants/employees to perform essential functions.)

Can you provide verification of your legal right to work in the U. S.? Yes No

Have you ever been convicted of a criminal offense? Yes No

If yes, please describe circumstances: _____

Have you ever been involuntarily terminated or asked to resign from any position of employment? Yes No

If yes, please describe circumstances: _____

Are you willing to submit to a pre-employment drug screening test? Yes No

List other information pertinent to the employment you are seeking:

EDUCATION (<i>starting with the High School you graduated from</i>)				
School Name	Location	Dates Attended	Degree Received	Major

Other training, certifications, or licenses held: _____

EMPLOYMENT (*Most Recent First*)

1. Employer _____
 Job Title _____ Dates Employed _____
 Supervisor _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ May we contact this employer? Yes No
 Duties Performed: _____
 Reason for Leaving: _____

2. Employer _____
 Job Title _____ Dates Employed _____
 Supervisor _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ May we contact this employer? Yes No
 Duties Performed: _____
 Reason for Leaving: _____

3. Employer _____

Job Title _____ Dates Employed _____

Supervisor _____

Address _____

City _____ State _____ Zip _____

Phone _____ May we contact this employer? Yes No

Duties Performed: _____

Reason for Leaving: _____

PROFESSIONAL REFERENCES		
Name	Occupation	Phone or Email

ACKNOWLEDGMENT AND AUTHORIZATION

In compliance with federal and state equal opportunity laws, qualified applicants are considered for all positions without regard to race, national origin, ancestry, sex, pregnancy, childbirth, medical conditions, marital status, religious creed, disability, age, sexual orientation, or any other characteristics protected by state or federal law.

I hereby certify that the information contained in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by CariNet unless I have indicated to the contrary. I authorize the references listed above, as well as all other individuals whom CariNet contacts, to provide CariNet any and all information concerning my previous employment and any pertinent information they may have. Further, I release all parties and persons from any and all liability for any damage that may result from furnishing such information to CariNet, as well as from any use or disclosure of such information by CariNet or any of its agents, employees, or representatives. I understand that any misrepresentation, falsification or material omission of information on this application may result in my failure to receive an offer or, if I am hired, immediate dismissal from employment.

In consideration of my employment, I agree to conform to the policies and procedures of CariNet and my employment and compensation can be terminated, with or without cause and with or without notice, at any time at the option of either the company or myself. I understand that no manager or representative of the employer, other than the Chief Executive Officer of the company, has any authority to enter into any agreement of employment for any specified period of time or to make any agreement contrary to the foregoing, and I further understand that any such agreement must be in writing.

Applicant Signature

Date

This application will remain active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this period should reapply. All offers of employment are conditioned upon the applicant being able to produce documents necessary to verify his/her legal right to work in the U.S.