

Application for Employment

2/12

Community Education/ 1227 Westen Avenue, Bowling Green, KY 42104/ 270-842-4281

INSTRUCTIONS

PLEASE PRINT IN BLUE OR BLACK INK. Answer each item completely and accurately. Incomplete answers may cause delays. False or incomplete answers will cause your application to be removed from consideration.

Position(s) for which you are applying

What is your interest in this position?

First Name	Middle Name	Last Name	Name you go by
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Local Phone		Cell Phone	Permanent or home phone

Email Address _____ Social Security # _____

Local Address _____ City _____ State _____ ZIP _____

List any state(s) other than Kentucky in which you have resided in the past five years. Also list years of residence. For example: Tennessee 2010-12.

Education

Circle highest grade completed: GED Test _____ year completed High School 9 - 10 - 11 - 12 College 1 - 2 - 3 - 4 attended – master's degree – post graduate Graduate School

Name and location of last school attended _____ Major Subject studied or degree received _____

***Proof of GED completion or High School graduation will be required.**

Personal References

List three persons not related to you who know your qualifications or who know your character:

	Name	Occupation	Address	Day Time Phone Number
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

Employment Record

Give complete record of employment history – including current employment.

Start with your present or most recent position and work back. Include all (part-time, full-time, assistantships, etc.)

Describe your duties and responsibilities in each position thoroughly so that your experience may be evaluated fairly.

Provide complete names and mailing address of any out-of-town employers.

Additional experience forms are available upon request. Letters of recommendation and copies of certificates, diplomas, etc., can be attached.

MOST RECENT

DATE OF EMPLOYMENT _____ TO _____ (month-year) (month-year) FULL TIME PART TIME <input type="checkbox"/> <input type="checkbox"/> IF PART TIME HOURS PER WEEK _____	NAME & ADDRESS OF EMPLOYING FIRM _____ _____ _____ TELEPHONE NUMBER _____	NAME & TITLE OF YOUR IMMEDIATE SUPERVISOR _____ _____ SALARY: STARTING FINAL \$ _____ \$ _____
LIST IN DETAIL AND DESCRIBE SPECIFIC DUTIES FOR EACH POSITION HELD _____ _____ _____		
REASON FOR LEAVING _____		

DATE OF EMPLOYMENT _____ TO _____ (month-year) (month-year) FULL TIME PART TIME <input type="checkbox"/> <input type="checkbox"/> IF PART TIME HOURS PER WEEK _____	NAME & ADDRESS OF EMPLOYING FIRM _____ _____ _____ TELEPHONE NUMBER _____	NAME & TITLE OF YOUR IMMEDIATE SUPERVISOR _____ _____ SALARY: STARTING FINAL \$ _____ \$ _____
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