Employment Application Form

(Kindly print all Information)

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| **Position Applied** | | | | **Interview Date (mm/dd/yyy)** | | | | | |
| **Family Name** | | | **First Name** | | | | **Middle Name** | | |
| **Address** House No. Street City ZIP Code | | | | | | | | | |
| **Contact No.** | **Mobile No.** | | | **Landline No.** | | | | **Fax No.** | |
| **Gender**  **□** Male □ Female | | **Civil Status**  **□** Single □ Married □ Divorced | | | | **Religion** | | | **Nationality** |
| **Date of Birth (mm/dd/yyyy)** | | **Place of Birth** | | | **Length of Stay in the U.S. (in Years)** | | | | |
| **Educational Attainment & Special Courses Taken**  **□** Post Graduate □ College □ High School □ Special Courses: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Course Taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| **Work Experience**  **EMPLOYER ADDRESS POSITION PERIOD**  **1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_**  **2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_**  **3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_**  **(Please use a separate sheet if necessary)** | | | | | | | | | |
| **Caregiving Trainings Attended (or any related field)**  **TITLE NO. OF HOURS WHEN TAKEN**  **1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | |
| **Special Skills / Talents**  **□** Cooking □ Driving □ Music **□** Arts □ Computer □ Technical **□** Entertaining □ Others \_\_\_\_\_\_\_\_ | | | | | | | | | |
| **Documents Presented**  **□** Fingerprint Clearance (DOJ/FBI) □ Driver’s License/DMV Printout □ Others \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  □ First Aid Card **□** Health Screening & TB Test \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
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|  | | | | | | | | | |
| **Have you ever worked for this company?** □ Yes □ No if yes, when? | | | | | | | | | |
| **Are you legally allowed to work in the United States?** □ Yes □ No | | | | | | | | | |
| **Type of employment desired** □ Full-Time □ Part-Time □ Temporary □ Seasonal | | | | | | | | | |
| **Have you ever been convicted of a felony?** □ Yes □ No if no, please explain | | | | | | | | | |
| **Have you ever pleaded guilty, no contest or been convicted of a crime?** □ Yes □ No  If yes, give dates and details  ***(Answering yes to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.)*** | | | | | | | | | |

I hereby certify under penalty of perjury thus, the above statement is true and correct. I give my permission for any necessary verification.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINTED NAME DATE SUBMITTED

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SIGNATURE