

**POWERHOUSE YOUTH FACILITY**  
Employment Application



**APPLICANT INFORMATION**

Last Name				First			M.I.	Date		
Street Address							Apartment/Unit #			
City				State			ZIP			
Phone				E-mail Address						
Date Available				Social Security No.			Desired Salary			
Position Applied for										
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>					
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?							
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain							

**EDUCATION**

High School				Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
College				Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Other				Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			

**REFERENCES**

*Please list three professional references.*

Full Name				Relationship						
Company				Phone						
Address										
Full Name				Relationship						
Company				Phone						
Address										
Full Name				Relationship						
Company				Phone						
Address										

**PREVIOUS EMPLOYMENT**

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?      YES <input type="checkbox"/> NO <input type="checkbox"/>			

**PREVIOUS ADDRESS - last 5 years**

Street Address		Apartment/Unit#	
City	State	Zip	From      To
Street Address		Apartment/Unit#	
City	State	Zip	From      To
Street Address		Apartment/Unit#	
City	State	Zip	From      To

**MILITARY SERVICE**

Branch	From	To
Rank at Discharge	Type of Discharge	

