



Application for Employment

Our policy is to provide equal opportunity employment to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date _____ Position Desired _____

Last name _____ First name _____ Middle name _____

Street Address _____

City _____ State _____ ZIP _____

Cell phone _____ Email _____

How did you hear about us? _____

When can you start? _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation.) Yes No

Are there any times you are unavailable to work? Yes No

If yes, please list the times below.

Initial Here _____

Why do you feel St. James Live is the right fit for you?

EDUCATION

School Name and Location	Year	Major	Degree
High School _____	_____	_____	_____
College _____	_____	_____	_____
Post-College _____	_____	_____	_____
Other Training _____	_____	_____	_____

In addition to your work history, are there other skills, qualifications, or experience that we should consider?

EMPLOYMENT HISTORY (START WITH MOST RECENT)

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

REFERENCES

Name _____ Title _____

Company _____ Phone _____

Name _____ Title _____

Company _____ Phone _____

Attach additional information if necessary.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature _____ Date _____