



Employment Application

Employment Application

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone _____ Email: _____

Date Available: _____ Desired Salary: _____

Position Applied for: _____

Looking for Part Time: _____ Full Time: _____

Have you ever worked for this company? **YES NO** If yes, when? _____

Are you able to legally work in the U.S. without being Sponsored? **YES NO**

Have you ever been convicted of a felony? **YES NO** If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? **YES NO** Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? **YES NO** Degree: _____

Other: _____

From: _____ To: _____ Did you graduate? **YES NO** Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Revised: May 17th, 2024
Revised by: Dorothy Barrow
Human Resource Director



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 NO**

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 NO**

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 NO**

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____



Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: _____ Date: _____

Dear interested applicant,

Thank you for completing an application with Inspire Case Management, Inc. We require copies of the following items in order to consider you for employment with our organization.

- Valid Driver's License
- Acceptable Identifying Document(s) for purposes of establishing identity (The Federal USCIS Form I-9 provides a full list of acceptable documents. Examples would be a Social Security Card, Birth Certificate or Visa/Green Card, if you are not a US Citizen. The full list may be provided to you upon request if needed)
- Valid Automobile Insurance Card (The proof of automobile insurance must show you as a covered driver and must show an expiration date). We understand you may not have the documents listed below. If you do not, or cannot furnish copies of these documents, if employed by Inspire Case Management Inc., we will provide you with the information, tests, or training necessary for you to obtain the required documents.
- Negative TB Test or clear chest x-ray (if you do not have this, we will provide you direction as to how and where to obtain this)
- CPR Card (if you do not have this, we will schedule you in a class to obtain this training)

Thank you again for your interest in our company!
Managing Owner

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Human Resource Director