



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	
<i>Please list three professional references.</i>	
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"/>			

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

Applicant's Name: _____

Date Completed: _____

COMPUTER KNOWLEDGE QUESTIONNAIRE

Use of computers in National Credit Solutions work environment has been increasing steadily and is becoming an important tool for NCS Consultants and Managers to accomplish their work. The AORS CRS Program would like to gauge applicants' computer literacy and encourage more. Please complete the questionnaire, below:

General Computer Skills () None

e-mail () No () Yes () Home () Work

Internet () Research () Pleasure () Home () Work

Do you have: () Basic Understanding () Working Knowledge

Do you use it: () Occasionally () Every Day

Word Processing () None

() MS Word () Word Perfect () Other _____

Do you have: () Basic Understanding () Working Knowledge

Do you use it: () Occasionally () Every Day

Spreadsheets () None

() Excel () Lotus () Quattro Pro

() Other _____

Do you have: () Basic Understanding () Working Knowledge

Do you use it: () Occasionally () Every Day

Presentation Software eg. PowerPoint, CorelDraw () None

Do you have: () Basic Understanding () Working Knowledge

Do you use it: () Occasionally () Every Day

Have you had exposure to:

() GIS () AutoCAD () Mapping () RIMS

() WIMS () None

Do you have: () Basic Understanding () Working Knowledge

Do you use it: () Occasionally () Every Day

Do you have a basic understanding of Database Management? () Yes () No

Other Applications – please specify:



CONFIDENTIAL

CRIMINAL HISTORY RECORDS INFORMATION

The information requested below is necessary to obtain criminal record information.

LAST NAME FIRST NAME MIDDLE INITIAL

ADDRESS CITY STATE/ZIP COUNTY

DRIVERS LICENSE NUMBER SOCIAL SECURITY NUMBER BIRTHDATE

If you answer yes to any of the following questions, please state where, when, and the nature of the offense in the comment section.

Have you ever been convicted of a felony or any offense involving moral turpitude?	YES _____	NO _____
Have you ever been convicted or plead guilty or no contest (nolo contendere) before a court of any federal, state, or municipal criminal offense? (Excluding minor traffic violations)	YES _____	NO _____
Have you received deferred adjudication or similar disposition for any federal, state, or municipal criminal offense?	YES _____	NO _____
Have you received probation or community supervision for any federal, state, or municipal criminal offense?	YES _____	NO _____
Have you ever been convicted of any criminal offense in a country outside the jurisdiction of the United States?	YES _____	NO _____

COMMENTS:

Under penalty of perjury, I affirm that the above information is true and correct and I have not knowingly omitted any information requested above. The above data, i.e., race, sex, and birth date, will not be used for employment purposes, but is requested for identification purposes for the criminal history records check. A report showing a record of conviction will not automatically eliminate you from employment consideration or offer of contract, but it may do so. The nature and date of the offense and the relationship to the position for which you are applying will be considered.

SIGN IF YOU AGREE TO THE ABOVE.

Printed Name **Signature** **Date**

Background Check Completed On: _____ Background Conducted by: _____

This section is to be used to list all counties and states of residence since age 18 or high school graduation. You must be specific about dates of residence.

CITY / TOWN	COUNTY	STATE	DATES:	
			FROM	TO

APPLICANT'S SIGNATURE

DATE

AGREEMENT

I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge and understand that any deliberate falsifications, misrepresentations, or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment.

I authorize the references listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all such parties from liability for any damage that may result from furnishing the same to you.

APPLICANT'S SIGNATURE

DATE