



# FLETCHER ACADEMY

An FAI Ministry

## Application for Employment

Revised 02/2021

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Desired Wage	Department	
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you currently authorized to work in the U.S. with or without sponsorship? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this organization in the past?	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, details:

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 references that are <b>not</b> related family members or former supervisors listed in the section below.</i>	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	
Full Name	Relationship
Company	Phone ( )
Address	

**PREVIOUS EMPLOYMENT**

*Please tell us about your most recent experience related to the position applied for.*

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 providing false or intentionally misleading information in my application or interview may result in disciplinary action up to and including termination of employment.

Applicants are considered and employees are treated during employment without regard to age, race, color, sex, national origin, marital or veteran status, medical condition, or disability. Date of birth, gender, and race as identified are collected during the post-offer hiring process from all applicants, and used only to facilitate the authorized vendor's performance of the required background check.

Signature \_\_\_\_\_ Date \_\_\_\_\_