

Holton Home Job Application

(Please note: No staff may smoke during their shift)

Name: _____
First Middle Last

Today's date: _____

Address: _____
Street Town

State ZIP Code

Phone: _____

Referred By: _____

Applied here before?: _____
Yes or No

Position Desired: _____

Date you can start: _____

Education: High School: _____
Name of school

Graduated? _____ If so, when? _____
yes or no year

College: _____
Name of college and city in which it's located

Graduated? _____ If so, when? _____
yes or no year

Any other training or licenses? _____

Former Employment: Please list your most recent employers:

Employer, and town and state in which they are located	Position you held	Month and year hired and Month and year left	Reason for leaving

Please list three people who can serve as professional references. Include recent supervisors.

1. Name _____

Phone number _____

2. Name _____

Phone number _____

3. Name _____

Phone number _____

Can you lift 50 lbs.? _____ (yes or no)

I authorize contact of previous employers and investigation of all statements made above. I understand that misrepresentation or omission of facts is cause for dismissal. I also understand that my employment may be terminated at any time.

 Signature

 Date