

## **EMPLOYMENT / JOB APPLICATION**

PERSONAL INFORMATION					
FULL NAME: DATE:					
	First	Middle	Last	_	
ADDRESS	:				
	Street Address			Apt/Suite	
	City	State		Zip Code	
E-MAIL: _			PHONE:		
SOCIAL SI	ECURITY NUME	BER (SSN):			
DATE AVA	ILABLE:		DESIRED PAY: \$	☐ HOUR ☐ SALARY	
POSITION	APPLIED FOR:				
EMPLOYM	IENT DESIRED:	☐ FULL-TIME ☐	PART-TIME SEASONAL		
		EMPLOYN	MENT ELIGIBILITY		
ARF YOU	I FGALLY FLIG	IBI F TO WORK	(IN THE U.S? ☐ YES	□ NO*	
			WITH JHC PREVIOU		
*IF YES, W	RITE THE STA	RT AND END DA	ATES:		
ARE YOU	OR HAVE YOU	EVER BEEN A	TENANT AT JHC? $\Box$	YES* □ NO	
*IF YES, P	LEASE EXPLAI	N:			
			ASONABLE ACCOM	MODATION TO PERFORM	

	ANY CURRENT EMPLOYEE OR BOARD	
	EDUCATION	
HIGH SCHOOL:	CITY / STATE:	
	TO:	
	o DIPLOMA:	
	CITY / STATE:	
	TO:	
GRADUATE? ☐ YES ☐ N	o DEGREE:	
OTHER:	CITY / STATE:	
FROM:	TO:	<del></del>
DEGREE/CERTIFICATIO	N:	
OTHER:	CITY / STATE:	
FROM:	TO:	
DEGREE/CERTIFICATIO	N:	
	PREVIOUS EMPLOYMENT	
EMPLOYER 1:		
Company / Ind		
E-MAIL:	PHONE:	
ADDRESS:		
Street Address		Apt/Suite
City	State	Zip Code
JOB TITLE:	RESPONSIBILITIES:	

FROM:		TO:	
REASON FO	OR LEAVING:		
EMPLOYER	R 2:		
	Company / Individu		
E-MAIL:			_ PHONE:
ADDRESS:			
	Street Address		Apt/Suite
	City	State	Zip Code
JOB TITLE:		_ RESPONSIBILITIES	:
FROM:		TO:	
REASON FO	OR LEAVING:		
EMPLOYER	R 3:		
	Company / Individu		
E-MAIL:			_ PHONE:
ADDRESS:			
	Street Address		Apt/Suite
	City	State	Zip Code
JOB TITLE:		_ RESPONSIBILITIES	:
FROM:		TO:	
REASON FO	OR LEAVING:		
		REFERENCE	S
			ILY)
FULL NAME	E:		RELATIONSHIP:
	First	Last	
COMPANY:			TITLE:
E-MAIL:			_ PHONE:
FULL NAME	E:		RELATIONSHIP:

	First	Last		
COMPANY:			TITLE:	
E-MAIL:			PHONE:	
FULL NAME	First	Last	RELATIONSHIP:	
COMPANY:			TITLE:	
E-MAIL:			PHONE:	
		MILITARY	SERVICE	
ARE YOU A	VETERAN?	□ NO		
BRANCH: _		RANK A	T DISCHARGE:	
FROM:		TO:		
TYPE OF DI	SCHARGE:			
IF NOT HON	ORABLE, PLEASE E	EXPLAIN:		
BACKGROUND CHECK CONSENT				
IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK? ☐ YES ☐ NO				
DISCLAIMER				

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type and verify that the application is fully completed in order for it to be considered.

Please complete each section EVEN IF you decide to attach a resume.

Please read this section carefully before signing your application: The information I have provided in this application for employment is true, correct and complete. False, incomplete or misrepresented information of any kind, will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination. I authorize the employer to contact and obtain information about me from

previous employers, educational institutions and references I provided, and any other party necessary to verify the information I disclosed in this application, a related résumé or a personal interview. I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose. I agree that this signed waiver can be mailed or faxed to any former employers or persons contacted for reference and that my faxed signature will serve as an original. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I fully understand and accept all terms and conditions in the above statement.

SIGNATURE	DATE
PRINT NAME	