## **EMPLOYMENT APPLICATION**

Reason for Leaving



Date: PERSONAL INFORMATION Name (Last Name, First Name, MI) Primary Phone Address (Street, City, State, Zip Code) Alternate Phone Are you a U.S. Citizen or Are you 18 Yes No Nο Yes legal permanent resident? years or older? Position Applying For Date Available to Start US Military? Yes No Have you been convicted of a felony that has not been expunged? Yes No If your answer is "Yes" please explain in detail in the space below, giving dates and nature of offense. A conviction may not disqualify you, but a false statement will. **EDUCATION** Name and Location of School **Degrees Received** GPA High School College Trade/Business/ Graduate **REFERENCES** Please list three references, other than relatives, who we may contact Years Known Name Relationship **Email Address** Phone jorie@austinpropertyteam.com **EMPLOYMENT HISTORY** Please list your employment history below beginning with the most recent employer, including U.S. military service Are you currently employed? If so, may we contact your present employer? City/State \_\_\_\_\_ Employer Supervisor Supervisor's Email Supervisor's Phone \_\_\_\_\_ Dates Employed: From To

Employer	City/State			
Supervisor	Supervisor	Supervisor's Email		
Supervisor's Phone	Dates Employed:	From	То	
Reason for Leaving				
Employer	City/State			
Supervisor	Supervisor	's Email		
Supervisor's Phone	Dates Employed:	From	To	
Reason for Leaving				
I understand that, as a condition of my METECS may perform a criminal backg creditworthiness or similar characteris			• •	
civil history, personal interviews, DMV standing, credit capacity, character, ge I authorize investigation of all stateme all information concerning my previou release the company from all liability f This authorization does not permit the the Americans with Disabilities Act (AD	records, any other public record records, any other public record reputation, personal characters contained herein and the refession employment and any pertinent for any damage that may result from the release or use of disability-relaters.	verifications, socials and any other information they rom utilization of sued or medical information	I security verification, criminal and formation bearing on my credit worthiness.  yers listed above to give you any and may have, personal or otherwise, and uch information.	

\* To sign the application you may use the "Fill & Sign" feature in Adobe Reader or print the completed form, sign and return