



Previous Training Completed:

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How many days of work have you missed in the last year? \_\_\_\_\_ Please explain: \_\_\_\_\_

**Shift Preference and Availability:**

Are you available to work (please circle all that apply):

1<sup>st</sup> shift - 8am-5pm                      Days available to work: Mon Tue Wed Thur Fri Sat Sun

2<sup>nd</sup> shift - 12pm-10pm                  Are you available to work overtime/after hours, as needed? Yes or No

3<sup>rd</sup> Shift – 10pm-8am                  Are you willing to be on-call, as needed? Yes or No

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We are required by the Immigration and Nationality Law, as amended, to employ only persons authorized to work in the United States.

Are you **currently** authorized to work **permanently\*** in the United States?                  \_\_\_Yes     \_\_\_ No

**Please circle the category below which best describes your authorized status:**

\*Person authorized to work permanently in the United States are individuals within one of the following seven categories: (1) U.S. Citizens, (2) U.S. Nationals, (3) Permanent Residents, (4) Temporary Residents, (5) Refugees, (6) Applicants for Temporary Residence, (7) Asylees.

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**Work Experience**

Beginning with your most recent employer, list all permanent, cooperative, summer and voluntary work. **Please complete all sections as thoroughly as possible.** When employed as a temporary or contractor, please list the temporary agency or contract firm as your employer.

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Name of Company:	Employed From:	Last Salary:
Address :	Employed To:	Job Title:
Phone Number:	Supervisor's Name:	Type of Work Performed:

Reason for Leaving:

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