

## APPLICATION FOR EMPLOYMENT

**PERSONAL INFORMATION**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number : ( ) \_\_\_\_\_ Alternate Phone Number: ( ) \_\_\_\_\_

Position desired? \_\_\_\_\_

When would you be available to begin work? \_\_\_\_\_ Full or Part time? \_\_\_\_\_

Are you available to work: DAYS [ ] NIGHTS [ ] WEEKENDS [ ] If you cannot work all days and times, please explain: \_\_\_\_\_

Are you legally eligible to be employed in the United States? YES [ ] NO [ ]

(Proof of identity and eligibility will be required upon employment)

Are you over the age of 18 years? YES [ ] NO [ ] (If no, you may be required to provide authorization to work.)

How did you hear about our company? \_\_\_\_\_

Have you ever worked for this Company before? YES [ ] NO [ ]

If yes, where? \_\_\_\_\_

When? (Give dates) \_\_\_\_\_ Job Title: \_\_\_\_\_

Do you have any relatives or friends who work for the Company? YES [ ] NO [ ] If yes, who and where do they work? \_\_\_\_\_

Are you presently employed? YES [ ] NO [ ] If yes, may we contact your employer? YES [ ] NO [ ]

**EDUCATION**

	Name and Location of School	Course of Study	No. of Years Completed	Diploma or Degree Received
High School				
College				
Vocational or Trade School				
Graduate Work				

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Have you completed any special courses, seminars and/or training that would enable you to perform the position for which you are applying? YES [ ] NO [ ] If yes, please describe:

\_\_\_\_\_

\_\_\_\_\_

**EMPLOYMENT    Start with your present or most recent position**

Name of Employer		Telephone Number (     )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From	To Month/Day/Year	Rate of Pay	

Describe the Work Performed  
\_\_\_\_\_

Name of Employer		Telephone Number (     )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From	To Month/Day/Year	Rate of Pay	

Describe the Work Performed  
\_\_\_\_\_

Name of Employer		Telephone Number (     )	
Full Address (Including Street, City, State & Zip)		Supervisor's Name and Title	
Dates Employed From	To Month/Day/Year	Rate of Pay	

Describe the Work Performed  
\_\_\_\_\_

Home Leasing, LLC is an equal opportunity employer. Home Leasing, LLC does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Home Leasing, LLC to hire me. If I am hired, I understand that either Home Leasing, LLC or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Home Leasing, LLC has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Home Leasing, LLC true and complete information on this application. No requested information has been concealed. I authorize Home Leasing, LLC to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_