



WARREN HERITAGE SOCIETY, INC. APPLICATION FOR EMPLOYMENT

(An Equal Opportunity Employer)

101 Chester Street, Front Royal, VA 22630

540-636-1446

DATE: _____

NAME: _____ SOCIAL SECURITY NUMBER: _____

PRESENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

ARE YOU 18 YEARS OR OLDER? YES / NO PHONE NO.: (_____) _____

IN CASE OF EMERGENCY CONTACT: _____
NAME

ADDRESS CITY STATE ZIP CODE PHONE NO.

POSITION APPLIED FOR: _____

DATE YOU CAN START WORK: _____ MAY WE CONTACT YOUR PRESENT EMPLOYER? _____

EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	DATES ATTENDED	DEGREE CERTIFICATE	MAJOR SUBJECTS (YEAR) STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS SCHOOL				

IF HIRED, ARE YOU ABLE TO SUBMIT PROOF THAT YOU ARE LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? YES / NO

MAY WE CONTACT YOUR PAST EMPLOYER(S)? YES / NO

MAY WE CONTACT YOUR PRESENT EMPLOYER(S)? YES / NO

EMPLOYMENT HISTORY

NAME OF PRESENT OR LAST EMPLOYER: _____

STARTING DATE: _____ LEAVING DATE: _____

STARTING SALARY: _____ FINAL SALARY: _____

JOB TITLE: _____ MAY WE CONTACT YOUR SUPERVISOR? _____

NAME & TITLE OF SUPERVISOR: _____ PHONE NO: _____

DESCRIPTION OF WORK: _____

REASON FOR LEAVING: _____

NAME PREVIOUS EMPLOYER: _____

STARTING DATE : _____ LEAVING DATE: _____

STARTING SALARY: _____ FINAL SALARY: _____

JOB TITLE: _____ MAY WE CONTACT YOUR SUPERVISOR? _____

NAME & TITLE OF SUPERVISOR: _____ PHONE NO.: _____

DESCRIPTION OF WORK: _____

REASON FOR LEAVING: _____

HAVE YOU BEEN EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR?

MISDEMEANOR: YES / NO FELONY: YES / NO IF YES, PROVIDE DATE(S) AND NATURE OF OFFENSE(S):

DATE: _____ Nature of Offense: _____

DATE: _____ Nature of Offense: _____

(Note: You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied).

REFERENCES:

List the names of three persons NOT related to you who have knowledge of your qualifications for this job.

	NAME	TELEPHONE	RELATIONSHIP	YEARS ACQUAINTED
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

AUTHORIZATION TO RELEASE INFORMATION

I hereby certify that all entries on this application are true and complete to the best of my knowledge, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part to any employment. I hereby authorize any representative of the Warren Heritage Society, bearing this release, or a copy thereof, within one (1) year of its date, to obtain any information from schools, residential management and/or credit agents, employers, criminal justice agencies, or any individual or business that can attest to my personal or professional activities. This information may include, but is not limited to, academic achievement, performance, attendance, personal history, training, disciplinary actions, credit, driving, criminal, civil court records and conviction and arrest records. I hereby authorize and request your release of such information upon request of the bearer. I understand that the information released is for official use only by authorized agents of Warren Heritage Society as necessary in the fulfillment of official responsibilities. I hereby release any individual, including record custodians, from any and all liability for damages of whatever kind or nature which may at any time result to me on account of compliance, or any attempts to comply with this authorization. Should there be any question as to the validity of this release, you may contact me as indicated below. I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with Warren Heritage Society is of an "at will" nature, which means that employment is not for any specific time period or duration, and that the employee may resign at any time and the employer may discharge employee at any time with or without cause.

SIGNATURE _____ DATE _____