FAAWC & COPT Job Application

Please print

Name: Phone:_	
Address:	
Position you are applying for:	
Employment Desired: Part-time Full-time	
Are you willing to work overtime?: Yes No	
List the last 3 most current jobs you have had starting with the most recent	
1) Company:	
Position/Job Duties:	
Dates of employment: May we contact?:	
Reason for leaving:	
2) Company:	
Position/Job Duties:	
Dates of employment: May we contact?:	
Reason for leaving:	
3) Company:	
Position/Job Duties:	
Dates of employment: May we contact?:	
Reason for leaving:	
Education:	
Please list 3 references (other than relatives), their phones numbers, and their relationship to you	
Have you ever been convicted of a felony? (this will not eliminate you from consideration) Yes	No
If yes, what was the nature?:	
I attest that the information I have provided on this form is true and accurate.	
Signature:	Date: