Application For Employment

please email to: gm@umhjsa.org

We are an Equal Opportunity Employer and committed to excellence through diversity. Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Informat	tion				
Name					
Address		City	State	Zip	
Phone number		Email address			
Are you legally eligible to work in the US?		Are you a veteran?			
Yes No \		Yes No			
If selected for employment are you willing to submit to a background check? Yes □ No □					
Position					
Position you are applying for		Available start date		Desired pay	
Employment desired					
□ F	ull time	☐ Part time	☐ Seasonal/Temporary		
Education					
School name	Location	Years attended	Degree received	Major	
References (business and professional only)					
Name		Title	Company	Phone	
. 10/119					

Employment History					
Employer (1)	Job title		Dates employed		
Work phone	Starting pay rate		Ending pay rate		
Address	City	State	Zip		
Employer (2)	Job title		Dates employed		
Work phone	Starting pay rate		Ending pay rate		
Address	City	State	Zip		
Employer (3)	Job title		Dates employed		
Work phone	Starting pay rate		Ending pay rate		
Address	City	State	Zip		
Employer (4)	Job Title		Dates employed		
Work phone	Starting pay rate		Ending pay rate		
Address	City	State	Zip		
Employer (5)	Job title		Dates employed		
Work phone	Starting pay rate		Ending pay rate		
Address	City	State	Zip		
Signature Disclaimer					
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my employment being terminated.					
Name (please print)	Signature				
Date					