



### Employment Application

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip Other Phone: \_\_\_\_\_

Are you 18 years or older? Yes \_\_\_ No \_\_\_ If no, please state your age: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

Have you lived outside of Virginia in the last 5 years? Yes \_\_\_ No \_\_\_  
If yes, indicate city and state: \_\_\_\_\_ Previous Address: \_\_\_\_\_  
include house/apt number & zip code

Do you have any medical condition(s) which may interfere with fulfilling the responsibilities of the position for which you applying? Yes \_\_\_ No \_\_\_  
If so, explain: \_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of a felony, barrier crime or subject of a founded Child Protective Service complaint? Yes \_\_\_ No \_\_\_  
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

In case of emergency, please notify:  
\_\_\_\_\_  
Name  
\_\_\_\_\_  
Full Address (include street, city, state, zip)  
\_\_\_\_\_  
Phone Relationship

### Education & Training

1. Name and location of high school: \_\_\_\_\_  
Highest grade completed: \_\_\_\_\_ Date of graduation or GED: \_\_\_\_\_

2. Name and location of College/University: \_\_\_\_\_  
Dates attended: \_\_\_\_\_ Number of years completed: \_\_\_\_\_  
Degree(s) earned: \_\_\_\_\_

3. Additional training or certification that would be helpful in evaluating your application: \_\_\_\_\_  
\_\_\_\_\_

### Experience

Begin with the current or most recent employment (including military experience). Use additional paper if necessary.

1. Position: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
Immediate Supervisor: \_\_\_\_\_  
Salary: From \_\_\_\_\_ TO \_\_\_\_\_  
May we contact your employer? \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Full Time: \_\_\_\_\_ OR Part Time: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

2. Position: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
Immediate Supervisor: \_\_\_\_\_  
Salary: From \_\_\_\_\_ TO \_\_\_\_\_  
May we contact your employer? \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Full Time: \_\_\_\_\_ OR Part Time: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

3. Position: \_\_\_\_\_  
Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
Immediate Supervisor: \_\_\_\_\_  
Salary: From \_\_\_\_\_ TO \_\_\_\_\_  
May we contact your employer? \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Full Time: \_\_\_\_\_ OR Part Time: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

### References

1. Name : \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Title: \_\_\_\_\_  
Phone: (W) \_\_\_\_\_  
(H): \_\_\_\_\_  
Relationship: \_\_\_\_\_

2. Name : \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Title: \_\_\_\_\_  
Phone: (W) \_\_\_\_\_  
(H): \_\_\_\_\_  
Relationship: \_\_\_\_\_

3. Name : \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Title: \_\_\_\_\_  
Phone: (W) \_\_\_\_\_  
(H): \_\_\_\_\_  
Relationship: \_\_\_\_\_

I understand that I will be required to submit written information to demonstrate that I possess the education, orientation training, staff development, certification and experience required by the job position.

**I hereby certify that the information given in this application is true and complete to the best of my knowledge.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date