

## Hope Restorations, Inc. P O Box 1656 Kinston, NC 28503 (252) 560-7507 (252) 520-9975

## **Employment Application**

		Арр	licant I	Informa	ation				
Full Name:							Date:		
	Last	First				М.І.			
Address:	Street Address						Apartmei	at/l liait t	
	Sireel Address						Apartmen	ivonii #	
	City					State	ZIP Code	;	
Phone:				Email					
Date Available: Social Security No.:_									
Position App	plied for:								
Are you a ci	itizen of the United S	YES tates? □	NO □	lf no, a	ire you	authorized to v	vork in the U.S.?	YES	NO □
Have you ev	ver worked for this co	YES pmpany? □	NO □	If yes, v	when?				
Have you ev	ver been convicted o	YES f a felony? □	NO □						
lf yes, expla	iin:								
			Educ	ation					
High Schoo	l:	A	\ddress:						
From:	То:	Did you gr	aduate?	YES	NO □	Diploma::			
College:		A	Address:						
From:	То:	Did you gr	aduate?	YES	NO □	Degree:			
Other:		<i>F</i>	Address:						
From:	To:	Did you gr	aduate?	YES	NO □	Degree:			

## References

Please list three profess	ional references.			
Full Name:				Relationship:
				Phone:
Address:				
Full Name:				Relationship:
				Phone:
Address:				
ull Name:				Relationship:
-				Phone:
<u> </u>				
	Previous I			
Company:				Phone:
				Supervisor:
			Ending Salary:	
				Ending Odiary. <u>¢</u>
-rom:	To:	Reason fo	or Leaving:	
May we contact your prev	ious supervisor for a reference?	YES	NO	
Compony				Dhanai
Company:				Phone:
Address.				Supervisor:
Job Title:	Starting Salary:			Ending Salary: <u>\$</u>
Responsibilities:				
-rom:	То:	Reason fo	or Leaving:	
		YES	NO	
May we contact your prov	ious supervisor for a reference?			

Company:				Phone:
Address:				Supervisor:
Job Title:	Starting S		Ending Salary: <b>\$</b>	
Responsibilities:				
From: To:		Reason fo	r Leaving:	
May we contact your previous supe	rvisor for a reference?	YES	NO □	
	Military	v Service		
Branch:			From:	То:
Rank at Discharge:		Type of I	Discharge:	
If other than honorable, explain:				
Please tell us anything you want to share about yourself, your past,	_			
your current situation, and/or why you want to work with Hope				
Restorations, Inc.				
	Disclaimer a	and Signat	ure	

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 release.

I also understand and agree that my successful participation in regular and random drug and alcohol screening programs are a required part of my employment with Hope Restorations Inc.

Signature: \_\_\_\_\_ Date:\_\_\_\_\_

Continued.