

Mardan Foundation of Educational Therapy, Inc.

APPLICATION FOR EMPLOYMENT

please print						
Namedate						
last	first	middle				
Present address:						
street #	city		state	zip	# years	
Permanent address:						
street #	city		state	zip	# years	
Are you 18 years of age or older	? yesn	06	email address:			-
Cell phone number:		home to	elephone number:			-
Name, address, and phone number of person to be notified in case of emergency or accident:						
Social security number:			Gender:			
Are you presently employed?		May we conta	act your present er	mployer? _		
Position applied for		Date you can	start			
Full time Part time work	If part time, please	specify days a	and hours availabl	e:		
Please state reason you desire p	art time work:					
Have you ever worked for Mardan before? If yes, please specify dates of employment and job title:						
Do you have any relatives preser	ntly working for this	company?	If so, give na	me(s)		_
Can you submit verification of you	ur legal right to work	k in the United	States?			
You will be required to submit fing CA law prohibits individuals with employment:						

List below all present and past employment, beginning with your most recent:

Company Name	from/to	Job Title	Supervisor	Reason For leaving
Company Address:				
Supervisor Phone:				
Supervisor Email:				

Company Name	from/to	Job Title	Supervisor	Reason For leaving
Company Address:				
Supervisor Phone:				
Supervisor Email:			_	

Company Name	from/to	Job Title	Supervisor	Reason For leaving
Company Address:				
Supervisor Phone:				
Supervisor Email:				

AN EQUAL OPPORTUNITY EMPLOYER

RECORD OF EDUCATION

Name and Address of school	Course of Study	Did you graduate?	Degree obtained	Number of years completed
High School				
College				
Other (specify)				
Other (specify)				

CERTIFICATIONS AND CREDENTIALS

Name of Sponsoring Body	Certificate Title	Issuance Date	Expiration Date

List three personal references. (Not former employers or relatives)

Name	Address	Email	Telephone	How do you know this individual
			cell:	
			work/other:	
			cell:	
			work/other:	
			cell:	
			work/other:	

Please list any other experiences, skills, or qualifications which you feel would qualify you to work for this company:

Are you, or have you been active in business, professional, civic or social organizations? You may exclude those which indicate your race, religious creed, color, disability, marital status, national origin, ancestry, sex, or age.

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN IN THE DESIGNATED PLACES, IF APPLICABLE:

The facts set forth above in my application for employment are true and complete. I understand that if employed, false or misleading statements or omissions on this application may lead to my dismissal at any time. I give the company permission to contact all present or former employers and I authorize investigation of all statements contained in this application form, as well as, my employment and personal history for purposes of potential employment.

Signature

date

I understand that if I become employed by the company that such employment is for no fixed term. I acknowledge that employment is with the mutual consent of myself and the company. I may voluntarily quit at any time and the company may terminate the employment relationship at any time, with or without advance notice, warning, or reason.

Signature

date

AN EQUAL OPPORTUNITY EMPLOYER