

Signature of Applicant

## Application for Employment Submit application and resume to admin@peacoxlearning.com

Position You Are Applying For Desired Salary \_\_\_ Date Available for Work: PERSONAL INFORMATION Last Name **First Name** Middle Address City State Zip Home Phone: Cell Phone: **Email address:** Social Security Number: Are you a U.S. Citizen? [ ] Yes [ ] No Have you ever been convicted of a felony? [ ] Yes [ ] No If selected for employment are you willing to submit to a pre-employment drug screening test? [ ] Yes [ ] No **EDUCATION School Name** Location Years Attended **Degree Received** Major Other training, certifications or licenses held: **EMPLOYMENT** Employer: Dates Employed: Work Phone: Pay Rate: Address: City: State: Zip: Position: **Duties Performed:** Supervisors Name and Title: Reason for leaving: May we contact them? [ ] Yes [ ] No REFERENCES Company Phone **Acknowledgement and Authorization** I certify that all answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Date