THE LEADERSHIP CENTER

2211 Q Street, Aurora, NE 68818 Phone: 402-694-3934 Fax: 402-694-6116

1 APPLICATION FOR EMPLOYMENT

Name:	Phone Number:						
Address:	City: _	State	:	_ Zip:			
Are you eligible to work in the United States?	YES	NO					
IF YES, at time of hire, you will be as purposes.	ked to provid	e 2 forms of valid ide	entificat	tion for validation			
Have you been convicted of or pleaded no cor	itest to a feloi	ny within the last 5 ye	ears?	Yes No			
If YES, explain:							
POSITION APPLIED FOR:							
DAYS AVAILABLE	HOURS AV	AILABLE					
Sunday			DE	SIRED WAGE:			
Monday			\$	per hour			
Tuesday							
Wednesday			DAT	E AVAILABLE			
Thursday			i	TO START:			
Friday							
Saturday							
Summarize your job related skills:							
EDUCATION Check Highest Completed							
Some High School High School Grad	luate	Some College	Col	lege Graduate			
Name and Address of Schools Attended		Diploma or Degree		Date Graduated			
REFERENCES							
List 3 people who know you and your work. Do not list relatives or previous employers NAME/TITLE OCCUPATION ADDRESS PHONE #							
1)							
2)							

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APPLICATION FOR EMPLOYMENT

		EMPLOYMENT HISTORY List Most Recent Position First					
Employer:		Phone Number	Phone Number:				
Address:		May we Contac	t? YES	NO			
Supervisor:		Start Pay	_End Pay _				
Job Duties:							
Employment Dates:	to	Reason for Leaving:					
Employer:		Phone Number	Phone Number:				
Address:		May we Contac	t? YES	NO			
Supervisor:		Start Pay	_End Pay _				
Job Duties:							
Employment Dates:	to	Reason for Leaving:					
Employer:		Phone Number	r:				
Address:		May we Contac	t? YES	NO			
Supervisor:		Start Pay	_End Pay _				
Job Duties:							
Employment Dates:	to	Reason for Leaving:					
 I understand that or if employed, a I authorize releas purpose of checki In consideration of Center. If employ with or without n The Leadership of drug screen as employment is conhave in effect. 	answers contain t any false state amount to suffice of employme ing my referent of my employme yed, my employme yed, my employme totice, at any tice center is a Druss requested by contingent upon	ned in this application are true and correct to the betweents or willful omissions may be cause for rejecticient grounds for dismissal without further notice, ent, salary, education and other records to The Leances and verifying my employment and educational ment, I agree to conform to the rules and regulation yment and compensation may be terminated, with ime, at the option of either The Leadership Centering Free work place and I agree to submit to a physical The Leadership Center. I understand my initial and my meeting such medical standards as The Leadership Center with 2 (two) forms of identification as requirements.	tion of my apadership Centle history. In history. In of The Letter or without corn without corn myself. I will be a continued continu	oplication Inter for the Padership ause, and tion and, d r may then			
		ation must be provided as a condition of employment					

The Leadership Center is an Equal Opportunity Employer.

these documents will be grounds for immediate termination.

Applicants will be selected solely on qualifications without regard to age, sex, race, color, religion, national origin, disability or any other legally protected status required by law.

APPLICANT'S SIGNATURE: _____ DATE: ____