

Please type or print legibly in ink.

## SOUL CARE LIFE SERVICES, INC.

## **EMPLOYMENT APPLICATION**

Soul Care Life Services is an equal opportunity employer.

The Corporation will not discriminate based on color, sexual orientation, religious belief, sex, age, race, national origin, non-job related disability, veteran status, marital status, or other prohibited criteria as these terms are used under applicable law.

## PLEASE READ CAREFULLY

- 1. Submission of an application does not assure employment.
- 2. The personal background and work experience information requested in this application will aid in evaluating your potential for employment and proper job placement, so please complete the form as thoroughly as possible.

	DATE OF APPLICATION:									
1.	NAME									
	LAS	Т		FIR	RST	MIDDLE				
2.	ADDRESS			CIT						
	NO.				Y	STATE	ZIP CODE			
3.	TELEPHONE NO.	_(	)		EMAIL					
4.	SOCIAL SECURIT	Y NO			DESIRED SALA	RY				
5.	POSITION (S) SOUGHT				DATE AVAILABLE					
			. ,		, ,					
6.	Do you have th	e legal ri	ght to work	in the United States	? Yes	No				
7.	Have you ever	Have you ever been convicted of a criminal offense (felony, misdemeanor, or summary)? Exclude summary traffic								
	violations punis	shable by	fine only.	Yes		No				
_					•					
8. Do you have any criminal charge(s) pending against you? Yes					No					
_										
9.	Have you ever	Have you ever forfeited bond or collateral in connection with a criminal charge? Yes No								
Conviction of a criminal offense may not be a ban to employment, however, if the answer to question							estion 7 or 8 is			
"yes", you must provide details on a separate sheet of paper and submit it with the application.										
10. EDUCATION										
NAN	ME OF SCHOOL	ADDRESS	OF SCHOOL	YEARS ATTENDED	GRADE AVERAGE	TYPE OF DEGREE	YEAR OF DEGREE			
HIGI	H SCHOOL:									
BUSINESS SCHOOL:										
COLLEGE:										
	-									
GRADUATE SCHOOL:										
				1	1					

**11. EMPLOYMENT HISTORY**Beginning with present or most recent list all previous employers, including self-employment, summer and part-time positions within the last 10 years. If necessary, use additional blank pages.

	E & ADDRESS OF MER EMPLOYER	DATES EMPLOYED FROM TO	POSITION & SUPERVISOR	REASON FOR LEAVING			
TOK	WEN ENTEN	TICOM TO	TOSITION & SOI ERVISOR	KEASON FOR ELAVING			
Tele	ephone: ()						
Description of work performed:							
Final /Present Salary:							
Tele	ephone: ()						
				L			
	•						
Fina	al /Present Salary:						
Tele	ephone: ( <u>)</u>						
Des	cription of work performed:						
Fina	al /Present Salary:						
19.	May inquiry be made of your	present or most recent em	plover regarding your record of	employment?			
<ol> <li>May inquiry be made of your present or most recent employer regarding your record of employment?</li> <li>YES</li> </ol> NO							
20. If presently employed, why do you wish to change your position?							
20. Il procentty employed, why do you wish to change your position:							
21.	If presently unemployed, wha	t have you done since you	ır last job?				
_							
22.	Have you ever been fired from	n any job or quit a job afte	r being informed that you would	be fired?			
	Yes No						
	If yes, please explain:						
	References						
23.		not former employers who have	e knowledge of your				
	qualifications and to whom we	e can refer.					
	Name	Ad	dress				
	- Traine	710					
	Phone No.	Oc	cupation				
	Name	Add	dress				
	Phone No.	00	cupation				
		00					

I certify that the information contained in this application is correct to the best of my knowledge, I understand that to falsify information is grounds for refusing to hire me or for discharge should I be hired.

I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information.

In consideration for my employment, I agree to abide by the rules and regulations of the company, which rules may be changed, withdrawn, added or interpreted at any time, at the company's sole option and without prior notice to me.

I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself.

Signature