

VEGOS JOB APPLICATION

(AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL

POSITION(S) APPLIED FOR _____ DATE OF APPLICATION _____

NAME _____

LAST

FIRST

MIDDLE

ADDRESS _____

STREET

CITY

STATE

ZIP CODE

EMAIL ADDRESS _____

PHONE #() _____ ALTERNATE PHONE #() _____

DATE AVAILABLE TO WORK ____/____/____

TYPE OF EMPLOYMENT

DESIRED:

FULL TIME PART TIME TEMPORARY SEASONAL INTERNSHIP

HAVE YOU APPLIED/INTERVIEWED WITH VEGOS IN THE LAST 6 MONTHS? YES NO

ARE YOU A U.S. CITIZEN? YES NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

DO YOU HAVE A CHECKING OR SAVINGS ACCOUNT INTO WHICH VEGOS CAN DIRECT DEPOSIT YOUR PAY? YES NO IF NOT, WOULD YOU BE WILLING TO ESTABLISH ONE? YES NO

EMPLOYMENT HISTORY

PROVIDE THE FOLLOWING INFORMATION FOR YOUR PAST 3 EMPLOYERS, ASSIGNMENTS, OR VOLUNTEER ACTIVITIES, STARTING WITH THE MOST RECENT:

_____ FROM	_____ TO	_____ EMPLOYER	() _____ PHONE
_____ JOB TITLE		_____ ADDRESS	
_____ IMMEDIATE SUPERVISOR AND TITLE		_____ SUMMARIZE THE NATURE OF THE WORK AND RESPONSIBILITIES	
_____ REASON FOR LEAVING		_____ SALARY	
_____		START \$ _____ PER _____	FINAL \$ _____ PER _____

_____ FROM	_____ TO	_____ EMPLOYER	() _____ PHONE
_____ JOB TITLE		_____ ADDRESS	
_____ IMMEDIATE SUPERVISOR AND TITLE		_____ SUMMARIZE THE NATURE OF THE WORK AND RESPONSIBILITIES	
_____ REASON FOR LEAVING		_____ SALARY	
_____		START \$ _____ PER _____	FINAL \$ _____ PER _____

EMPLOYMENT HISTORY CONTINUED

FROM	TO	EMPLOYER	() PHONE
JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF THE WORK AND RESPONSIBILITIES	
REASON FOR LEAVING		SALARY	
		START \$ _____ PER _____ FINAL \$ _____ PER _____	

EDUCATIONAL BACKGROUND

NAME AND LOCATION	YEARS COMPLETED	DID YOU GRADUATE?	COURSE OF STUDY
HIGH SCHOOL			N/A
COLLEGE/UNIVERSITY			
CERTIFICATES/LICENSES/OTHER			

SPECIAL SKILLS:

AVOCATIONAL INTERESTS OR HOBBIES:

REFERENCES

NAME	TITLE	COMPANY	PHONE

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions, and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

I understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

SIGNATURE OF APPLICANT: _____ DATE: _____

HOW DID YOU HEAR ABOUT THIS POSITION?
