

Joint Committee on Performance Evaluation and Expenditure Review



Application for Employment

*Please type or print your answers.
PEER may verify information you supply on this form.*

POSITION:

Position for which you are applying: _____

When are you available for employment? _____

PERSONAL INFORMATION:

Full Legal Last Name _____ First _____ Middle _____

Permanent Mailing Street Address _____

City _____ State _____ Zip _____

Telephone number (_____) _____ - _____ Cell telephone number (_____) _____ - _____

E-mail address _____

EDUCATIONAL INFORMATION:

Do you possess a high school diploma or GED certificate? Yes _____ No _____

List colleges from which you have received a degree, including the degree and major area of study (begin with most recent institution attended):

EMPLOYMENT INFORMATION:

Current Employment: Provide the following information regarding your current employer.

Name/Address/Telephone # of Employer	Employment Dates	Position Title	Supervisor's Name
Description of Duties and Responsibilities	Beginning Salary	Ending Salary	Reason for Leaving

May PEER contact your present employer? Yes _____ No _____

Former Employment: Provide the following information regarding your former employers for the past ten (10) years.

Name/Address/Telephone # of Employer	Employment Dates	Position Title	Supervisor's Name
Description of Duties and Responsibilities	Beginning Salary	Ending Salary	Reason for Leaving

Name/Address/Telephone # of Employer	Employment Dates	Position Title	Supervisor's Name
Description of Duties and Responsibilities	Beginning Salary	Ending Salary	Reason for Leaving

WORK SKILLS:

(You may continue your answers on another sheet of paper and attach it to your application.)

Please explain in detail how your work skills satisfy those required of this position as stated in the job announcement:

A large, empty rectangular box with a thin black border, intended for the applicant to write their response to the question about work skills.

PROFESSIONAL and LICENSURE INFORMATION:

Professional Organizations: List the names, addresses, and dates of membership for your current and past professional memberships.

Names/Addresses of Professional Organizations	Dates of Membership

Are you currently licensed in a profession by a state/federal licensing authority? Yes _____ No _____

If yes, please provide the:

type of license _____

name of the state/federal licensing authority _____

telephone number of the state/federal licensing authority _____

original date of licensure _____ current date of licensure _____

Are you in good standing with the licensing authority? Yes ____ No ____

MILITARY INFORMATION:

Were you ever a member of the armed forces? Yes ____ No ____

If yes, please specify dates of service

Military Branch _____ Rank _____ Grade _____

LEGAL INFORMATION:

Have you ever been convicted of any criminal charges (felonies or misdemeanors)? Yes _____ No _____

When? _____ Location of court of jurisdiction?

Disposition? _____

Have you ever had a civil judgment taken against you or have you ever filed for bankruptcy? Yes ____ No ____

If yes, when? _____ City/County _____ State _____

REFERENCES:

Professional References: List the names, addresses, telephone numbers, and occupations of three professional references.

Name/Address of Professional References	Telephone #	Occupation	Years Known

Character References: List the names, addresses, telephone numbers, and occupations of three character references (excluding relatives and former employers).

Name/Address of Character References	Telephone #	Occupation	Years Known

Use this space for supplemental information.

Please help us in our recruiting efforts. How were you made aware of this job opening?

All statements made herein or on attached documents are true and complete to the best of my knowledge, and are made in good faith. I authorize PEER to verify this information.

Date: _____ **Signature of Applicant:** _____

(Note: Unsigned applications will not be accepted or considered.)