



# SPECIALIZED TRAINING FOR ADULT REHABILITATION, INC START EMPLOYEE APPLICATION

Position Applied for \_\_\_\_\_

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE			
BACKGROUND CHECKS AND PHYSICAL FUCTION TESTS ARE A CONDITION OF EMPLOYMENT			
Last Name	First Name	M.I.	Date
Street Address		Apartment #	
City	State	Zip Code	
Phone #	Email		
Date Available	SS #	Desired Salary	
Hours available for work?			
If you are hired, can you supply the required documentation to verify your lawful right to work in the United States?			YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?	
Do you have a Valid Driver's License and the State minimum insurance coverage?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Drivers License #	
Other experience and/or training related to the job?			
EDUCATION			
High School	Address		
Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	
College	Address		
Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	
Other	Address		
Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	
REFERENCES			
<i>Please list three references.</i>			
Full Name	Relationship		
Company	Phone # ( )		
Address			
Full Name	Relationship		
Company	Phone # ( )		
Address			
Full Name	Relationship		
Company	Phone # ( )		
Address			

PREVIOUS EMPLOYMENT	
Company	Phone # ( )
Address	Supervisor
Job Title	
Responsibilities	
From	To Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Company	Phone # ( )
Address	Supervisor
Job Title	
Responsibilities	
From	To Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Company	Phone # ( )
Address	Supervisor
Job Title	
Responsibilities	
From	To Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>	
DISCLAIMER AND SIGNATURE – PLEASE READ CAREFULLY	
<p>I hereby certify that the facts set forth in the above employment application are true and complete. I understand that if employed, false statements on this application or interview may be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history. You are additionally authorized to secure background checks and/or physical function testing as required. I understand that this is not a contract for any specific length of employment, and if employed, it will be an “employment-at-will” basis.</p> <p>*START is an Equal Opportunity Employer*</p>	
Signature	Date