

Employment History

FROM	TO	EMPLOYER
	TELEPHONE	
JOB TITLE		ADDRESS
IMMEDIATE SUPERVISOR	SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
REASON FOR LEAVING	HOURLY RATE/SALARY	

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I UNDERSTAND THAT IF I AM EMPLOYED, ANY MISREPRESENTATION OF MATERIAL, OMISSION MADE BY ME ON THIS APPLICATION WILL BE SUFFICIENT CAUSE FOR CANCELLATION OF THIS APPLICATION AND/OR IMMEDIATE DISCHARGE FROM JUST JOBS EMPLOYMENT SERVICE WHENEVER IT IS DISCOVERED.
 I GIVE THE EMPLOYER THE RIGHT TO CONTACT AND OBTAIN INFORMATION FROM ALL REFERENCES, EMPLOYERS, EDUCATIONAL INSTITUTION AND TO OTHERWISE VERIFY THE ACCURACY OF THE INFORMATION CONTAINED IN THIS APPLICATION.
 I HEREBY RELEASE FROM LIABILITY JUST JOBS AND ITS REPRESENTATIVES FOR SEEKING, GATHERING AND USING SUCH INFORMATION AND ALL OTHER PERSONS, CORPORATIONS OR ORGANIZATIONS FOR FURNISHING SUCH INFORMATION.

JUST JOBS DOES NOT UNLAWFULLY DISCRIMINATE IN EMPLOYMENT AND NO QUESTIONS ON THIS APPLICATION IS USED FOR THE PURPOSE OF ELIMINATING OR EXCUSING ANY APPLICANT FROM CONSIDERATION FOR EMPLOYMENT ON A BASIS PROHIBITED BY LOCAL, STATE OR FEDERAL LAW.
 THIS APPLICATION IS CURRENT FOR ONLY 90 DAYS. AT THE CONCLUSION OF THIS TIME, IF YOU HAVE NOT HEARD FROM JUST JOBS AND STILL WISH TO BE CONSIDERD FOR EMPLOYMENT, IT WILL BE NECESSARY TO FILL OUT A NEW APPLICATION OR HAVE THIS ONE REACTIVATED.
 IF I AM HIRED, I UNDERSTAND THAT I AM FREE TO RESIGN AT ANY TIME, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE, AND JUST JOBS RESERVES THE SAME RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE, EXCEPT, AS MAY BE REQUIRED BY LAW. THIS APPLICATION DOES NOT CONSTITUTE AN AGREEMENT OR CONTRACT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OR DEFINITE DURATION. I UNDERSTAND THAT NO REPRESENTATIVE OF JUST JOBS OTER THAN AN AUTHORIZED OFFICER HAS THE AUTHORITY TO MAKE ANY ASSURANCE TO THE CONTRARY. I FURTHER UNDERSTAND THAT ANY SUCH ASSURANCE MUST BE IN WRITING AND SIGNED BYTHE AUTHORIZED OFFICER.
 I UNDERSTAND IT IS JUST JOBS POLICY NOT TO REFUSE TO HIRE A QUALIFIED INDIVIDUAL WITH A DISABILITY BECAUSE OF THAT PERSON'S NEED FOR REASONABLE ACCOMMODATION AS REQUIRED BY THE AMERICAN DISABILITIES ACT.
 I UNDERSTAND THAT IF I AM HIRED I WILL BE REQUIRED TO PROVIDE PROOF OF IDENTITY AND LEGAL WORK AUTHORIZATION.
 I REPRESENT AND WARRANT THAT I HAVE READ AND FULLY UNDERSTAND THE FOREGOING AND SEEK EMPLOYMENT UNDER THESE CONDITIONS.

Signature of Applicant: _____ Date: _____