Application for Employment



Personal Information					
Name*	DOR:	Social Security No.			
Name:Last First	Middle	Social Security 1100			
Race		Sex			
Address					
Street	City	State	Zip Code		
Telephone # () Mol	oile # ()	E-Mail			
Desition (c) Applied for		Date of Applica	ation / /		
Position (s) Applied for If you are under 18, and it is required, can	vou furnish a work permit	Date of Applica	Yes No		
If no, please explain					
Have you ever been employed here befor	e?		Yes No		
If yes, give dates and position/s:					
Are you legally eligible for employment in Type of employment Desired:	in this country?		☐ Yes ☐ No		
Date Available for work:/			Can		
you perform the essential duties of the joint and the second and the second and the second are second as the second are s			YES NO		
reasonable accommodation?		- J ,			
Are you able to meet the requirements of the position?			Yes No		
Have you ever pled "guilty" or "no conte			□Yes □No If		
yes, please provide date(s) and details:					
Driver's license number if driving is an essential job function State					
Employment History — List last employment first, including US military service.					
From To	Employer				
Starting Job Title / Final Job Title	Address				
Immediate Supervisor and Title	Summarize the nature of work performed and jo	ob responsibilities			
May we contact for Reference?	Hourly rate/salary				
Reason for leaving:	Start \$	Per Final \$	Per		
From To	Employer				
Starting Job Title / Final Job Title	Address				
Immediate Supervisor and Title	Summarize the nature of work performed and ju	ob responsibilities			
May we contact for Reference?	Hourly rate/salary				
Reason for leaving:	Start \$	Per Final \$	Per		

Years completed Graduate? Yes / No Diploma or degree GPA Other formal education or experience which you feel is relevant to the position for which you are applying:	May we contact for Reference?		Hourly rate/salary			
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be contingent on the results of such investigation, alcohol and drug screening, and physical examination. (please initial)	_					

I understand that if hired I will be an at-will employee and that my employment and compensation can be terminated at any time, with or without cause and with or without notice, at the option of either Chitter Chatter P.C. or myself. I further understand that no supervisor or representative of Chitter Chatter P.C., other than the President, has any authority to enter into any agreement contrary to the foregoing and that such agreement must be in writing and signed by the President. In consideration of such employment, I agree to conform to the rules and policies of the company, including the arbitration procedure. (<i>please initial</i>) Signature of Applicant:		
Signed:	_ Date:	