

"Empowering Individuals with Disabilities since 1978 1760 Daniel Boone Industrial Parkway, Truesdale, Mo. 63380 Telephone: 636-456-4800 www.wcswinc.com

## **EMPLOYEE EMPLOYMENT APPLICATION**

APPLICANT INFORMATION		DATE:			
Last Name:	First:	MI:			
Street Address:		D.O.B			
City:	State:	Zip			
Home Phone:	Cell Phone:				
		Cell Phone: SS#: SS#:			
		00001			
Position Applied For:		Desired Salary:			
Are you a citizen of the United Sta	ites:YesNo If no, ar	e you authorized to work in the			
U.S.?YesNo					
Have you ever worked for this cor	npany? Yes No				
-					
Have you ever been convicted of a					
If yes, explain?					
EDUCATION					
High School:	Address:				
	u graduate?YesNo				
College	Address:				
	Address I graduate?YesNo				
		-0			
Other:	Address:				
From: To:Did you	ı graduate?YesNo	Degree:			
DEFENSION (Discos list three was	f)				
<b>REFERENCES (</b> Please list three pro	•				
Company:	Relationship: Phone:				
	Relationship: Phone:				
Address:					

Full Name:		Relationship:				
Company:		Phone:				
Address:						
PREVIOUS EM	PLOYMENT					
Company:			Phone:			
Address:			_ Supervisor:			
Job Title:		Starting Salary: _		Ending Salary:		
Responsibilitie	es:					
From:	То:	Reason For Leaving:				
May we conta	ct your previou	s employer for a reference:	Yes	No		
Company:			Phone:			
Address:			_ Supervisor:			
Job Title:		Starting Salary:		Ending Salary:		
Responsibilitie	es:					
From:	To:	Reason For Leaving:				
May we conta	ct your previou	s employer for a reference:	Yes	No		
Company:			Phone:			
Job Title:		Starting Salary: _		Ending Salary:		
Responsibilitie	es:					
		Reason For Leaving:				
		s employer for a reference:				

## DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. By signing this application I am consenting to a background check.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my termination. Also, if I am hired I understand that I will have to submit to a drug test before beginning employment with the Warren County Sheltered Workshop, Inc.

SIGNATURE: \_\_\_\_\_

Date:

## EQUAL OPPORTUNITY

The Warren County Sheltered Workshop, Inc. is an equal opportunity employer. Your employment will not be discriminated against due to race, gender, age, or religion. Your employment and evaluations will be based on work performance and attendance.