

Application For Employment

ARIZONA
SCIENCE
CENTER



hands-on, eye-opening fun

PERSONAL

Name: _____
Last First Middle Initial

Street address: _____
City, state, zip

Home Phone: _____ Do you have a valid Arizona Drivers License? _____

Cell/Page: _____

email address: _____

Position Applying for: _____

Salary Requirement: _____ When can you begin? _____

Special skills, training, languages, etc.: _____

EDUCATION

College Name: _____

Degree: _____ # of years attended: _____

Business/Trade/Technical School Name: _____

High School Name: _____

Did you graduate: _____ # of years completed: _____

EMPLOYMENT HISTORY

(Resume is sufficient and may be attached)

Company Name:	<u>From:</u>	<u>To:</u>
Address/Phone Number:	_____	
Name of Supervisor:	_____	
Job title:	_____	
Reason for Leaving:	_____	

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Job title:	_____	
Reason for Leaving:	_____	

I agree to undergo a background security check, including fingerprinting by the Arizona Department of Public Safety to be considered for employment.

I understand that I will be required to submit and pass a drug/alcohol test as a pre-requisite to my employment, and that random drug/alcohol testing may be done without prior notice as a condition of continued employment.

The information provided in this application for employment is true, correct, and complete. If employed, any misstatement or omission of fact on the application may result in my dismissal.

Signature

Date

Interviewer notes/comments: