

Employment Application

APPLICANT INFORMATION							
Last Name		First		M.I.		Date	
Street Address					Apartment/Unit #		
City		State		ZIP			
Phone(s)		E-mail Address					
Requested Payment							
Position Applied for							
Are you legally entitled to work in the U States on a permanent basis?	Jnited YES	NO 🗌	If you are h	ired, when can you st	art wor	k?	
Can you work overtime?	YES 🗌 I	NO If no, explain					
Driver's License Number	State						
Recent Accidents?	YES 🗌 I	NO 🗌	If yes, expl	ain			
This position can require working at a can explain whether you would request.					ving an	automo	tive vehicle.
EDUCATION							
High School		Address					
	Did you graduate?	YES	NO 🗌	Degree			
College	,	Address					
	Did you graduate?	YES	NO 🗌	Degree			
Other		Address		ı			
	Did you graduate?	YES	NO 🗌	Degree			



REFERENCES					
Please list three personal references.					
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 fo	or Leaving				
Troil To Reason N	or Leaving				
May we contact your previous supervisor for a reference?		NO 🗆			
COMPANY		Phone ()			
Address		Supervisor			
Job Title					
Responsibilities					
From To Reason fo	or Leaving				
May we contact your previous supervisor for a reference? YES NO					



PREVIOUS EMPLOYMENT (continued)					
COMPANY		Phone ()			
Address		Supervisor			
Job Title					
Responsibilities					
From To	Reason for Leaving				
May we contact your previous supervisor for a reference? YES NO					
DISCLAIMER AND SIGNATURE					
I certify that my answers are true and complete to the best of my knowledge.					
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.					
Signature		Date			



PERMISSION TO OBTAIN AND RELEASE INFORMATION

APPLICANT INFORMATION							
Last Name	First	M.I.					
AUTHORIZATION & INDEMNITY							
I authorize Levander's to obtain information about me from my previous employers, schools, personal references and others who have knowledge of my work history.							
I authorize my previous employers, schools that I have attended and personal references to disclose to Levander's information as they may request.							
I indemnify and hold harmless Levander's, previous employers, schools that I have attended and personal references from any and all damages that may result from information that is released during this process.							
Signature	Date						