

Previous Place of Employment: \_\_\_\_\_  
 Date of Employment: \_\_\_\_\_  
 Name of Immediate Supervisor: \_\_\_\_\_  
 Indicate Job Duties: \_\_\_\_\_

**WORKSHOPS & TRAINING SEMINARS:**

List all training courses and seminars attended or any other technical training courses that you may have received a certificate in: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**REFERENCES:**

**Personal/Character Reference**

| <b>Name:</b> | <b>Title:</b> | <b>Relationship:</b> | <b>Contact Number:</b> |
|--------------|---------------|----------------------|------------------------|
|              |               |                      |                        |
|              |               |                      |                        |

**Professional:**

| <b>Name:</b> | <b>Department:</b> | <b>Title:</b> | <b>Contact Number:</b> |
|--------------|--------------------|---------------|------------------------|
|              |                    |               |                        |
|              |                    |               |                        |

**COMMITTEE & VOLUNTEER WORK:**

| <b>Name of Organization:</b> | <b>Position held:</b> | <b>Duties:</b> | <b>Contact Number of Supervisor:</b> |
|------------------------------|-----------------------|----------------|--------------------------------------|
|                              |                       |                |                                      |
|                              |                       |                |                                      |

**SPECIAL ACCOMPLISHMENTS & AWARDS:**

**RESUME INFORMATION:**

Resume attached:      YES       NO

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, education institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any representations or material omission made by me on this application will be sufficient cause for cancellation of this application of immediate termination of employment if I am employed, whenever it may be discovered.

I represent and warrant that I have read and fully understand the foregoing and that I seek employment under these conditions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ (yy/mm/dd)