# SKILLS UNLIMITED PRE-EMPLOYMENT APPLICATION

**ASSOCIATE**

Social Security Number: Last Name: First Name:
Goes By: Middle:

**CONTACT INFORMATION**

Home Phone: Message Phone:
Cellular: E-Mail Address:

Home Address: Unit #:
City: State: Zip Code:

**DESIRED WORK** (Please circle all that apply)

Temporary: Temporary-to-Regular: Direct-Hire:
Days: Evenings: Part – Time:

What Type of position are you looking for?
How much pay are you looking for? Per Hour Salary
Did you receive your high school diploma or GED:
How did you hear about us?

**PREVIOUS EMPLOYMENT**

Employed From: To: Company Name:
Company Address: City: State: Zip:
Position Held: Rate of Pay:
Industry: Reason for Leaving:
Supervisor's Name: Supervisor's Title: Phone #:
Duties:

Employed From: To: Company Name:
Company Address: City: State: Zip:
Position Held: Rate of Pay:
Industry: Reason for Leaving:
Supervisor's Name: Supervisor's Title: Phone #:
Duties:

Employed From: To: Company Name:
Company Address: City: State: Zip:
Position Held: Rate of Pay:
Industry: Reason for Leaving:
Supervisor's Name: Supervisor's Title: Phone #:
Duties:

Employed From: To: Company Name:
Company Address: City: State: Zip:
Position Held: Rate of Pay:
Industry: Reason for Leaving:
Supervisor's Name: Supervisor's Title: Phone #:
Duties:

**VERIFICATION AND AKNOWLEDGEMENT** ( Please Circle one)

Although this will not preclude employment with SKILLS Unlimited, we need to know if you have ever been convicted of a felony?
Although this will not preclude employment with SKILLS Unlimited, we need to know if you have ever been convicted of a misdemeanor?
If Yes, please describe the nature of crime: Date crime occurred:
Where did the crime occur?

I acknowledge SKILLS Unlimited could perform a background check for pre-employment and I give SKILLS Unlimited permission to perform such check.

I authorize SKILLS Unlimited to request and receive, and I authorize any of the persons or organizations to give SKILLS Unlimited information concerning my previous employment, education or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application.

I release all such parties from any and all liability including damage that may result in furnishing such information to SKILLS Unlimited.

Applicant's Signature: Date: