Universal Dental Spa

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Employment Application

Applicant Information

Full Name: _____ Date: _____

Last *First* *M.I.*

Address: _____

Street Address *Apartment/Unit #*

_____

City *State* *ZIP Code*

Phone: _____ Email _____

Date Available: _____ Desired Pay: **$** _____ per hour

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address:

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address:

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address:

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Employment History

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: Starting Pay: **$** Ending Pay: **$**

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Pay: **$** _____ Ending Pay: **$** _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Background Check Consent

YES NO

If asked, are you willing to consent to a background check?

Disclaimer and Signature

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure that this application is acceptable, please print or type with the application being fully completed for it to be considered.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

Signature: _____ Date: _____

Print Name: _____