

ADDITIONAL INFORMATION

1. Have you ever been bonded? Yes No If yes, with which employer? _____

2. Membership in professional/civic organizations: _____

3. Have you ever been convicted of a felony that is substantially related to the position you are applying for?
Yes No
4. List specialized training, if appropriate, e.g., typing, shorthand, computer or other skills not already indicated: _____
5. Please list any other pertinent facts you wish to present that may help us evaluate your qualifications for the position you seek: _____
6. Have you ever been employed by this agency? Yes No If so, when? _____
7. Have you ever applied to this agency for employment? Yes No If so, when? _____

EMPLOYMENT/VOLUNTEER EXPERIENCE (Please list 3, beginning with the most recent)

Employer: _____ Position: _____
Date Employed: from: _____ to: _____ Hours per week: _____
Salary: starting: _____ final: _____
Supervisor: _____ Phone: _____
Brief description of duties: _____

Employer: _____ Position: _____
Date Employed: from: _____ to: _____ Hours per week: _____
Salary: starting: _____ final: _____
Supervisor: _____ Phone: _____
Brief description of duties: _____

Employer: _____ Position: _____
Date Employed: from: _____ to: _____ Hours per week: _____
Salary: starting: _____ final: _____
Supervisor: _____ Phone: _____
Brief description of duties: _____

REFERENCES: Please list three persons (not related to you) that you have known at least one year:

Name	Title	Years Known
------	-------	-------------

Address	Phone Number
---------	--------------

Name	Title	Years Known
------	-------	-------------

Address	Phone Number
---------	--------------

Name	Title	Years Known
------	-------	-------------

Address	Phone Number
---------	--------------

CONDITIONS OF APPLICATION AND EMPLOYMENT

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information is grounds for dismissal in accordance with LifeSpan Inc. policy. I authorize the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have and release all parties from all liability for any damage that may result from furnishing information to LifeSpan Inc. In consideration of my employment, I agree to conform to the rules and regulations of LifeSpan Inc. and my employment and compensation can be terminated, with or without cause by LifeSpan Inc. and/or myself.

SIGNATURE

DATE

LifeSpan, Inc. is an equal opportunity/affirmative action employer.