



Wilshire Boulevard Temple

Application for Employment

PERSONAL INFORMATION:

Full Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone () _____

Position Applied For: _____ Referral Source: _____

Is there any function of the job for which you are applying which you are unable to perform with or without reasonable accomodation: _____ Yes _____ No

If Yes, please identify that function (if you are not sure of the functions of the job for which you are applying, please request a job description listing them):

Have you previously been employed by this Organization?

Dates of Employment: From: _____ To: _____

If employed in this position for which you have applied, would you be in a supervisory or subordinate relationship to any relative or member of your household? _____

EMERGENCY CONTACT:

In case of an accident or any emergency, notify _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone () _____

EDUCATION AND LICENSES:

(Company Use Only - Verification)

Name/Location	No. of Years	Course of Study	*Degrees	By	Contact	Date
High School						
College/University Telephone: () _____						

*All degrees will be verified; if university is out of town, please furnish telephone number including area code.

Professional License	Type of License	Expiration Date	State of Issue

Subjects of special study and/or research work: _____

CRIMINAL HISTORY:

Have you ever been convicted of, or pled guilty or nolo contendere to, any crime (felony or misdemeanor)?
 (Please exclude any misdemeanor conviction for possession of marijuana occurring more than two years ago, any referral to a pre-trial or post-trial diversion program, any misdemeanor conviction for which probation was completed and the case was dismissed, or any convictions that have been judicially ordered sealed, expunged, or statutorily eradicated.) _____ Yes _____ No

If Yes, please explain each conviction in detail and provide the date of each conviction. A conviction will not necessarily disqualify an applicant from employment. Each case will be considered on its own merit(s).

Are any criminal charges (felony or misdemeanor) currently pending against you? _____ Yes _____ No

If Yes, please explain each charge in detail. (Pending charges will not necessarily disqualify an applicant from employment.) Please list: _____

WORK EXPERIENCE:

Beginning with your most recent position, please fully account for all time, including periods of unemployment and any prior employment by this company whether the position was full time, part-time. Please submit your resume and/or additional sheets of paper as necessary and attach to application.

	Last/Present Employer	Next to Last Employer	Third to Last Employer
Company Name			
Address			
Supervisor's Name			
May we contact them? If so, provide telephone number.			
Dates Employed:			
Title/Duties Paid (Y or N) Full Time/Part Time			
Salary			
Reason for leaving			
May we check references with your current employer? If yes, Indicate three people who have supervised your work.			
Company Use Only Verified By/Date/Contact			

