

Midwest Education and Training, LLC

Date: _____

Applicant Information

Full Name: _____ Maiden: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

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? _____

Do you have a valid driver's license? YES ☐ NO ☐ If yes, what state was it issued in? _____

Indicate type of employment available to work. Check Shifts available to work.

Full-time ☐ Part-time ☐ Temporary ☐ Weekends only ☐

7am-3pm ☐ 8am-5pm ☐ 3pm-11:30pm ☐ Other ☐

11pm-7:30am ☐ 7am-7pm ☐ 7pm-7am ☐

Education

High School: _____ Address: _____

Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____ Address: _____

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: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

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

Skills and Certifications

List all valid professional licenses and registrations you hold; include the certification/registration number and the date of expiration.

Indicate other employment skills, special training or related courses. Include any other information that would strengthen your application.

List computer programs, operating systems, and other office equipment you have experience operating?

Who referred you?

CONSENT TO OBTAIN BACKGROUND INVESTIGATION REPORTS

I, _____, hereby authorize Superior Blessings, LLC (employer) to obtain such background investigation reports on me as it deems necessary or advisable in connection with my application for employment (if I am an applicant) or at any time in connection with my employment (if I am hired or if I am a current employee). I understand that such reports are sometimes called "consumer reports" and may contain information about me concerning my credit worthiness, credit standing, credit capacity, character, character, general reputation, personal characteristics, mode of living, and/or other job-related information. I understand Superior Blessings, LLC is not responsible for the accuracy or completeness of the information contained in any such reports. I also understand that this consent is a continuing consent and will remain valid until such time as I inform Superior Blessings, LLC (employer), in writing, that I wish to revoke this consent.

Signature _____

Date: _____

APPLICANT CERTIFICATION AND PRE-EMPLOYMENT INVESTIGATION AUTHORIZATION

I certify that statements contained in my employment application are correct, and if employed, understand that any false information in this application, or its supporting documents, will be sufficient grounds for termination without notice. I further agree that all rules, orders, and regulations of Superior Blessings, LLC affecting my employment shall constitute a part of my appointment or employment. My signature authorizes Superior Blessings, LLC to review my previous employment, driving and criminal records, and other background data as it may relate to this position(s) for which I am applying.

Signature _____

Date: _____

Is there anything that would prevent you from accepting a job offer from Superior Blessings, LLC? (for example, but not limited to, lack of transportation or a prior/existing contractual obligation, etc.) Yes _____
No _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____

Date: _____