

Launch Your Kid 2340 East 5th Street Charlotte, NC 28204 704-277-2327

Cherie@launchyourkid.com www.launchyourkid.com

APPLICATION FOR EMPLOYMENT PERSONAL INFORMATION

Name:	SSN:		
Address:			
Phone Number:	Birth Date:		
Email Address:	Date you can start:		
Are you employed now?	May we contact your employer?		
List available days and times:			
EDUCATION			
Did you graduate from High School?_	G.E.D.?		
List below all colleges attended: Name and Location	Dates Attended Degree or Cours	se	
REFERENCES (Please list the names, addresses & phone numbers of three personal references who are NOT related to you.)			
Name	Address Phone Numb	er	
Describe activities and experience that is not work related that may help you qualify for the position:			









PREVIOUS EMPLOYMENT (Please list all employers for the past five years.)

Company Name:	
Address:	
Telephone:	Supervisor:
Job Title:	
Job Description:	
Company Name:	
Address:	
Telephone:	Supervisor:
Job Title:	
Job Description:	
Company Name:	
Address:	
Telephone:	Supervisor:
Job Title:	
Job Description:	
·	
the best of my know and release all partic furnishing information	facts contained in this application are true and complete to ledge. I authorize investigation of my previous employment es from all liability for any damage that may result in on to you. I understand and agree that if hired my o definite period and may be terminated at anytime."
Date:	Signature:







