

A Utah College of Applied Technology Campus

An Equal Opportunity Employer

Each question must be fully and accurately answered. Incomplete applications will not be considered. Use blank paper if you do not have enough room on this form. Please type or print except for the signature. All information given will be available only to persons who have a "need to know" or as required by law.

NAME			то	DAY'S DATE	
Last		First	Initial		
PRESENT ADDRESS				TEL. NO	Evening
No.	Street	City State	Zip	Day	Evening
Position applied for?		When are you	available for er	nployment?	
Which type of employment are y	ou seeking: Full-time	Part-time Temporary/ Second	ibstitute or Sumi	mer Salary expect	ation:
				(Must include an amount or range of amounts)
		RECORD OF E	MPLOYM	ENT	
1. Name of Current/Most Rece	nt Employer	Address		Telephone	Type of Business
Dates En	ployed	Reason for Leaving		Supervisor's Name	e and Title
From	То	1			
Mo. Yr.	Mo. Yr.				
May we contact your cu		Yes	No		
2. Name of Next Previous Emp	loyer	Address		Telephone	Type of Business
Dates En	ployed	Reason for Leaving		Supervisor's Name	e and Title
From	То	1			
Mo. Yr.	Mo. Yr.				
List the jobs you held, duties p	erformed, skills used or learn	ed, advancements or promotions.			
3. Name of Next Previous Emr	lover	Address		Telephone	Type of Business

3. Name of Next Previous Employer			Address	Telephone	Type of Business	
Dates Employed Rea		Reason	for Leaving	Supervisor's Name a	Supervisor's Name and Title	
	_					
From	То					
Mo. Yr.	Mo. Yr.					

List the jobs you held, duties	performed, skills used	or learned, advancements	or promotions.
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	4. Name of Next Previous Employer			Address	Telephone	Type of Business
Dates Employ	ved		Reason f	for Leaving	Supervisor's Nan	ne and Title
From	То					
Mo. Yr. M						
List the jobs you held, duties perfor	med, skills u	sed or learr	ned, advancer	nents or promotions.		
Have you ever been convicted of	a criminal	offense?	Yes	No (A conviction with	ll not necessarily disqualify an	applicant.)
f yes, please explain:				·	· · ·	••
Are you over 18 years of age?	Yes	No				
Are you authorized to work in the Federal Law requires proof of id	e United St lentity and	ates? Y	es No	ation for all new employees	.)	
	-					
For Driving Job Only: Do you h	ave a valid	driver's lie	cense? Ye	es No License N	umber and State Issued:	
For Driving Job Only: Do you h	ave a valid	driver's lie	cense? Ye	es No License N		MAJOR SUBJECTS
For Driving Job Only: Do you h	ave a valid	driver's lie	cense? Ye	es No License N SC	umber and State Issued:	
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For Driving Job Only: Do you has EDUCATION (Circle land Elementary & Jr. High High School College Other job-related education	ave a valid ast year co 5 1 1	driver's lid ompleted 6 2 2 2	cense? Ye d) 7 8 3 4 3 4	es No License N SC	umber and State Issued: HOOL NAME	MAJOR SUBJECTS
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Certification: I understand that the Salt Lake – Tooele Applied Technology College (SLTATC) will thoroughly investigate my work and educational history and verify all data given on the application, related papers, and interviews. I authorize the SLTATC to perform said reference checks and investigations and release them from all liability or damage in obtaining this information. I authorize all individuals, schools, employers and firms named herein to provide any information requested about me and I release them from all liability for damage in providing this information. The information I have supplied is true and complete to the best of my knowledge. I understand that false statements on this application may be considered sufficient cause for elimination of my application from consideration or, if employed, for dismissal. If employment is obtained under this application, I will comply with all rules and regulations of the College. I agree to be responsible for any College property and equipment issued to me until returned to the College and agrees to pay for any property and equipment which I do not return. I also understand that a six month probationary period applies for all new employees.

Date

Signature of Applicant