

Employment Application

Name:			
Name: (Last)	(First)		(Middle)
Address:		(City) (State) (Zip)
Telephone No:			
	rk? YES NO Are you 18 y		
	r than a spouse employed by SMEL?		
r yes, list name(s)Y	ou may not be assigned to a position who	ere you would supervise or be s	upervised by a relative.
osition you are applying for: _			
	EDUCA	<u>ATION</u>	
	Name of School	Did you Graduate?	Degree/Certificate
igh School			<u> </u>
ollege			
raduate School			
raddate ochool			
dditional Certifications			
· Training			
	FMDI OVMENI	F RECORD #4	
	EMPLOYMENT (Most Recent		
Dates	Position	on	
Employer-Contact Name/Add	ress/Telephone Number		
, -y-:			
Responsibilities			
เรองคุดแจเทแเตล			

Reasons for Leaving



EMPLOYMENT RECORD #2

Dates	Position	
Employer-Contact Name/Address	/Telephone Number	
Responsibilities		
Reasons for Leaving		Salary
	EMPLOYMENT RECORD #	<u>13</u>
Dates	Position	
Employer-Contact Name/Address	/Telephone Number	
Responsibilities		
Reasons for Leaving		Salary
List three work references from p	revious supervisors (name, title, phone, add	lress)
Places provide any additional information	ection which you feel is portinent to your applies	ation for this position.
riease provide any additional inform	ation which you feel is pertinent to your applica	auon for this position:

Stimulating Minds through Entrepreneurship and Leadership (SMEL) is an Equal Opportunity Employer. Personnel are chosen on the basis of ability and qualifications without regard to race, color, religion, sex, age, national origin, marital status, disability, sexual orientation, veteran status or citizenship status in compliance with Federal, State and municipal laws. Stimulating Minds through Entrepreneurship and Leadership maintains a strict policy and practice of confidentiality regarding employment applications and related material.

APPLICANT'S STATEMENT:

I certify that the information contained in this application is correct to the best of my knowledge. I authorize investigation of all matters contained in this application and agree that any misleading or false statements would be cause for rejection of this application or would be sufficient cause for dismissal after my employment.

I understand that my employment is also contingent upon the receipt by SMEL of satisfactory work references. I hereby authorize my present/past employers to furnish SMEL with their records of my service. I agree if employed, to supply SMEL with such verifications as they may be permitted by Federal, State and municipal codes and regulations to request of me.

At-Will Employment

Finally, I understand that SMEL is an "at-will" employer. This means that if I am employed, it is not for any specific time period or duration. I may leave the company at any time and SMEL may terminate my employment at any time, for any reason, with or without notice. I understand that this employment application and any other company documents are not contracts of employment. I further understand that any oral or written statements to the contrary may be expressly disavowed and should not be relied upon by me.

Signature	Date