## **BOONE COUNTY SENIOR SERVICES, INC.**

## **Application for Employment**

515 Crown Pointe Drive

Phone: (765) 482-5220 & (317) 873-8939 Fax: (765) 482-5239

Lebanon, IN 46052 Fax: (765) 482-523

Email: bcssi@booneseniors.org



APPLICANT INFORMATION												
Last Name				First					M.I.	Date		
Street Address						Apartment/Unit #						
City				State					ZIP			
Phone E-ma				nil Address								
Date Available Social Se				ecurity No: Des			red Salary					
Position Applied for												
Are you a citizen of the United States? YES \( \Boxedown \) NO \( \Boxedown \) If no, are you authorized to work in the U.S.? YES \( \Boxedown \) NO \( \Boxedown \)												
Have you ever been convicted of a felony? YES NO Solution NO If yes, explain fully in a signed and notarized statement, including all related details and documentation. Include violation, location, date, and disposition. Any falsification is grounds for permanent dismissal.												
EDUCATION												
High School				Address	Address							
From	То	Did you g	raduate?	YES	NO 🗆	D Degree						
College				Address	Address							
From	То	Did you g	raduate?	YES 🗌	NO   Degree							
Other	ther			Address	Address							
From	То	Did you graduate?			NO 🗌							
REFERENCES												
Please list three professional references. (Please do not include family members)												
Full Name							Relationship					
Company Phone ( )												
Address												
Full Name							Relationship					
Company		F	Phone ( )									
Address												
Full Name							Relationship					
Company					F	Phone ( )						
Address												

PREVIOUS EMPLOYMENT										
Company			Phone							
Address			Supervisor							
Job Title			Starting Salary	\$ Ending Salary \$						
Responsibilities										
From	То	Reason for Leaving	]							
May we contact you	r previous super	visor for a reference?	NO  If no, explain							
Company			Phone							
Address			Supervisor							
Job Title			Starting Salary	\$	Ending Salary \$					
Responsibilities										
From	То	Reason for Leaving								
May we contact your previous supervisor for a reference? YES NO If no, explain										
Company			Phone							
Address			Supervisor							
Job Title			Starting Salary	\$	Ending Salary \$					
Responsibilities										
From	То	Reason for Leaving								
May we contact your previous supervisor for a reference? YES NO If no, explain										
MILITARY SERVICE										
Branch				From To						
Rank at Discharge				Type of Discharge						
If other than honorable, explain										
DISCLAIMER AND SIGNATURE										
I hereby swear or affirm, under the penalties or perjury, that the statements made in this application are true, complete, and correct. Falsification of any of the information on this application is grounds for permanent application and/or employment dismissal. I hereby authorize Boone County Senior Services, Inc. or its affiliates to contact any person, firm, officer, corporation, association, or institution to obtain any information, files, documents, records, or other information pertaining to my application for employment. This may include, but is not limited to, educational records and transcripts, public and legal records, background checks, and previous employment records.										
Signature			Date							