



Application for Employment with SPARC

Candidate's Name: _____ Date: _____

Address: _____

Telephone Number: _____ Last four of your SS# _____

Are you 18 years of age or older? ☐ Yes ☐ No Personal Email Address _____

Are you either a U.S. citizen or an alien authorized to work in the U.S.? ☐ Yes ☐ No

Have you ever worked or attended school under another name? If so, under what name?

Position Desired

Position: _____ Start date available: _____

Do you prefer: ☐ Full-time ☐ Part-time If part-time, hours per week desired: _____

Hours you are available to work: _____

Days of week you are available to work: _____

Are you able to work: ☐ Weekends ☐ Holidays ☐ Nights ☐ Overtime ☐ Volunteer

Do you have reliable transportation? ☐ No ☐ Yes

Have you previously worked for SPARC? ☐ No ☐ Yes from _____ to _____

Reason(s) for leaving SPARC: _____

Former supervisor(s) SPARC: _____

How did you learn about this opening? _____

Education

High School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	GED? <input type="checkbox"/> Yes <input type="checkbox"/> No
Technical School: Certificate/Degree?	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
College/University: Certificate/Degree?	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Post-Graduate Education: Certificate/Degree?	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Other applicable education, training or special skills and listed certificates/degrees:		

Skills

Are you experienced in using personal computers? ☐ Yes ☐ No ☐ PC ☐ Mac

Are you able to use Microsoft Word or Excel? What other programs are you capable of using?

Work Experience

Please list all previous employment, beginning with the most recent. If you need more room, you may attach another sheet of paper.			
Employer:		Address:	
Fr:	To:	Position Held:	Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			

Employer:		Address:	
Fr:	To	Position Held:	Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Employer:		Address:	
From	To	Position Held:	Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Employer:		Address:	
Fr:	To	Position Held:	Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			

References

Identify three persons who know your work, beginning with the most recent.

Name: _____ Phone Number: _____ Email: _____

Address: _____ City, State, Zip: _____

Position or Title: _____ Years Known: _____

Name: _____ Phone Number: _____ Email: _____

Address: _____ City, State, Zip: _____

Position or Title: _____ Years Known: _____

Name: _____ Phone Number: _____ Email: _____

Address: _____ City, State, Zip: _____

Position or Title: _____ Years Known: _____

Authorization and Acknowledgements

I affirm that the information I have provided in this application is true to the best of my knowledge, information and belief, and I have not knowingly withheld any information requested. I understand that withholding or misstating any information requested in this application is grounds for rejection of my application, and that providing false or misleading information in this application is grounds for discharge.

I authorize the company to verify my references, record of employment, education record, and any other information I have provided. Unless otherwise noted, I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. I understand, that if offered the position, I am subject to and agree to any and all Background Checks, Finger Printing or any other mandated inquiries that are required by SPARC, and that employment is dependent on outcome of these inquiries. In addition, I release the company, my former employers and all other persons and entities, from any and all claims, demands or liabilities arising out of or in any way related to such inquiry or disclosure.

Candidate's Signature

Date