

University Academy
Employment Application

Name _____ Phone _____

Address _____

Please list your last 3 employers. Most recent first.

Employer: _____	Dates Employed: _____
Dates Employed: _____	Salary/Rate of Pay _____
Address: _____	Phone: _____
Supervisor: _____	Work Duties _____
Reason for leaving: _____	

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Do you have a high school diploma or its equivalency? _____

Are you currently employed? _____

Can we contact your present employer? _____

On what date are you available for work? _____

Please circle the positions you would be available for:

Full Time

Part Time

Substitute

Any of these

Have you ever been convicted of : A.) A felony or misdemeanor classified against a person or family? B.) A felony violation of any law intended to control the possession or distribution of any substance included as a controlled substance in the Texas Controlled Substance Act? _____.

If yes, please explain: _____

Please write a small paragraph about yourself.

Emergency contact _____ Phone _____

Relationship _____

I hereby declare that all information in this application is true to best of my knowledge.

Signature _____ Date _____