Mateenah's Manor LLC

4515 W Pearce Rd, Laveen, Arizona, 85339

admission@mateenahsmanor.com

Employment / Job Application

PERSONAL INFORMATION

FULL NAME:		DATE:			
ADDRESS:					
CITY:	STATE:	ZIP CODE:			
E-MAIL:		PHONE:			
SOCIAL SECURITY NUMBER (SSN):					
DATE AVAILABLE:					
DESIRED PAY: \$ □ HOUR □ SALARY					
POSITION APPLIED FOR:					
EMPLOYMENT DESIRED: \square FULL-TIME \square PART-TIME \square SEASONAL					
EMPLOYMENT ELIGIBILITY					
ARE YOU A U.S. CITIZEN? □ YES □ NO*					
*IF NO, ARE YOU ALLOWED TO WORK IN THE U.S.? \square YES \square NO					
HAVE YOU EVER WORKED FOR THIS EMPLOYER? \square YES* \square NO					
*IF YES, WRITE THE START AND END DATES:					
HAVE YOU EVER BEEN CONVICTED OF A FELONY? \square YES* \square NO					
*IF YES, PLEASE E	XPLAIN:				

EDUCATION

HIGH SCHOOL:	CITY / STATE:		
FROM:	TO:		
GRADUATE? □ YES □	NO		
DIPLOMA:			
COLLEGE:	CITY / STATE:		
FROM:	TO:		
GRADUATE? □ YES □	NO		
DEGREE:			
OTHER:	CITY / STATE:		
FROM:	TO:		
DEGREE:			
OTHER:	CITY / STATE:		
FROM:	TO:		
	EMPLOYMENT HISTORY		
EMPLOYER #1 :			
E-MAIL:	PHONE:		
ADDRESS:			
CITY:	STATE: ZIP CODE:		
STARTING PAY: \$	□ HOUR □ SALARY		
ENDING PAY: \$	□ HOUR □ SALARY		
JOB TITLE:	RESPONSIBILITIES:		
STARTING DATE:	ENDING DATE:		

REASON FOR LEAV	ING:		
EMPLOYER #2:			
E-MAIL:	PHONE:		
ADDRESS:			
CITY:	STATE:	ZIP CODE:	
STARTING PAY: \$	□ HOUR □ SALARY		
ENDING PAY: \$	□ HOUR □ SALARY		
JOB TITLE:	RESPONSIBILITIES:		
STARTING DATE:	ENDING DATE:		
REASON FOR LEAV	ING:		
EMPLOYER #3:			
E-MAIL:		_ PHONE:	
ADDRESS:			
CITY:	STATE:	ZIP CODE:	
STARTING PAY: \$	□ HOUR □ SALARY		
ENDING PAY: \$	□ HOUR □ SALARY		
JOB TITLE:	RESPONSIBILITIES:		
STARTING DATE:	ENDING DATE:		
REASON FOR LEAV	ING:		
	REFEI	RENCES	
REFERENCE #1:		RELATIONSHIP:	
COMPANY.	т	TITLE.	

E-MAIL:	PHONE:				
REFERENCE #2:	RELATIONSHIP:				
COMPANY:	TITLE:				
E-MAIL:	PHONE:				
REFERENCE #3:	RELATIONSHIP:				
COMPANY:	TITLE:				
E-MAIL:	PHONE:				
IF ASKED, WOULD YOU CONSENT TO A BACKGROUND CHECK? ☐ YES ☐ NO DISCLAIMER					
	s is an Equal Opportunity Employer who is re this application is acceptable, please pring in order for it to be considered.				
application leads to my eventual e	nswers are true and honest to the best of my mployment, I understand that any false or n esult in my employment being terminated.				
SIGNATURE	DATE:	<u></u>			
PRINT NAME					