

Employment Application

Applicant Information

First Name:

Pro Careers Inc.

Last Name:

5051 Washington St. W.

Address Street 1:

Cross Lanes, WV

Address Street 2:

25313

City:

Zip Code:

State:

Are you over the age of 18? Yes No

Are you a US citizen? Yes No

If no, do you have the
right and necessary
paperwork to work in
the US? Yes No

Do you possess a valid
drivers license? Yes No

Drivers License Number:

Do you have your own
transportation? Yes No

Social Security Number:

Contact Information

Daytime Phone:

Evening Phone:

Email:

Employment Information

Position Desired:

Which do you prefer? Part Time Full Time

Salary Requirement: (USD)

Date Available for Work:

Have you applied here before? Yes No

Qualifications and Experience

Did you graduate?

High School: Yes No

College: Yes No

Nursing School: Yes No

Technical School: Yes No

Do you have a current
CPR certification? Yes No

Past and Present Employers

Current Employer

Phone:

Address

Position

City, State, Zip

Date Started

May we contact? Yes No

Previous Employer

Phone:

Address

Position

City, State, Zip

Date Started

May we contact? Yes No

REFERENCES (Give work or medical related references, Do not list friends or relatives.)

Name

Phone:

Address

City, State, Zip

Name

Phone:

Address

City, State, Zip

Name

Phone:

Address

City, State, Zip

Criminal Background Inquiry

Have you ever been convicted of a crime other than a minor traffic offense, or pled no contest to a crime?

Yes No

If yes please explain.

Emergency Contact

Name

Home Phone:

Address

Work Phone:

City, State, Zip

Relationship:

Other Information

Comments:

I authorize PROCAREERSINC.COM to verify my employment history.

I certify that the facts contained in this application are true and complete to the best of my knowledge and I certify that, if employed falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information they have, personal or otherwise, and release all parties from all liability for damage that may result from furnishing same to you.

If you are completing this form in the Pro Careers office please press the **Print** button and print your application when done. If you are not in the office please click the **Diskette icon** at the top right side of this web page and then **Save** the file. After saving, **Email** the file as an attachment to the appropriate offices from the list provided.