

EDUCATION

	Name/Location of School	# Years Attended	Did you Graduate	Major
Elementary				
High School				
College/Trade				

GENERAL INFORMATION

Subjects of special study or research work: _____
 Special skills: _____
 Activities (Civic, Athletic, etc): _____
 Do you speak a foreign language fluently: Yes No
 If yes, please list: _____
 U.S. Military Service: Yes No Rank: _____

FORMER EMPLOYERS

(List Employers Starting With the Most Current)

Company: _____ Employment Dates: ___/___/___ to ___/___/___
 Starting Position: _____ Starting Wage: _____
 Final Position: _____ Final Wage: _____
 Address: _____ City: _____ State: ___ Zip: _____
 Telephone: _____ Supervisor Name/ Title: _____
 Reason For Leaving _____

Company: _____ Employment Dates: ___/___/___ to ___/___/___
 Starting Position: _____ Starting Wage: _____
 Final Position: _____ Final Wage: _____
 Address: _____ City: _____ State: ___ Zip: _____
 Telephone: _____ Supervisor Name/ Title: _____
 Reason For Leaving _____

Company: _____ Employment Dates: ___/___/___ to ___/___/___
 Starting Position: _____ Starting Wage: _____
 Final Position: _____ Final Wage: _____
 Address: _____ City: _____ State: ___ Zip: _____
 Telephone: _____ Supervisor Name/ Title: _____
 Reason For Leaving _____

If you have a resume outlining your prior employment, you may provide it instead of filling out the above "Former Employers" section. Please be sure that information is complete.

PROFESSIONAL REFERENCES

Name: _____ Telephone: _____
Address: _____ City: _____ State: ___ Zip: _____
Relationship: _____ Years Known: _____

Name: _____ Telephone: _____
Address: _____ City: _____ State: ___ Zip: _____
Relationship: _____ Years Known: _____

Name: _____ Telephone: _____
Address: _____ City: _____ State: ___ Zip: _____
Relationship: _____ Years Known: _____

SIGNATURE

I certify that the information given is correct to the best of my knowledge and that falsification of this information is grounds for dismissal. In consideration of my employment, I agree to the rules and regulations of the Gettysburg Nature Alliance dba Gettysburg Heritage Center. I understand that my first six (6) months of employment are on a probationary basis and that my employment and compensation can be terminated at any time at the option of either the company or myself.

_____/_____/_____
Signature Date

TO BE COMPLETED AFTER EMPLOYMENT:

I understand that I have been hired in the position of _____. However, I will perform any other duty that I am assigned. I have received a copy of the rules and regulations. I understand that my posted schedule is a guideline and may not be strictly observed by management, depending on pace of business, staffing shortages, etc., and that I may on occasion be asked to work past my scheduled quitting time. I understand that I must work my share of evening, weekends, and holidays.

_____/_____/_____
Signature Date

(PLEASE COMPLETE OUR SURVEY ON THE NEXT PAGE)

