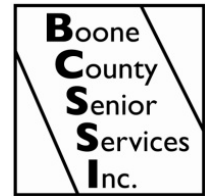


BOONE COUNTY SENIOR SERVICES, INC.

Application for Employment

515 Crown Pointe Drive
Lebanon, IN 46052

Phone: (765) 482-5220 & (317) 873-8939
Fax: (765) 482-5239
Email: bcssi@booneseniors.org



APPLICANT INFORMATION

Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No:		Desired Salary	
Position Applied for					
Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐					
Have you ever been convicted of a felony? YES ☐ NO ☐ If yes, explain fully in a signed and notarized statement, including all related details and documentation. Include violation, location, date, and disposition. Any falsification is grounds for permanent dismissal.					

EDUCATION

High School		Address			
From	To	Did you graduate?	YES ☐	NO ☐	Degree
College		Address			
From	To	Did you graduate?	YES ☐	NO ☐	Degree
Other		Address			
From	To	Did you graduate?	YES ☐	NO ☐	Degree

REFERENCES

Please list three professional references. (Please do not include family members)

Full Name		Relationship	
Company		Phone ()	
Address			
Full Name		Relationship	
Company		Phone ()	
Address			
Full Name		Relationship	
Company		Phone ()	
Address			

Boone County Senior Services, Inc. is an Equal Opportunity Employer (EOE). Applicants are considered for all positions, and employees are treated during employment without regard to race, color, religion, sex, national origin, marital or veteran status, medical condition or handicap. As employers/government contractors, we comply with government regulations and affirmative action responsibilities.

PREVIOUS EMPLOYMENT			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES ☐ NO ☐ If no, explain			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES ☐ NO ☐ If no, explain			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES ☐ NO ☐ If no, explain			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I hereby swear or affirm, under the penalties or perjury, that the statements made in this application are true, complete, and correct. Falsification of any of the information on this application is grounds for permanent application and/or employment dismissal. I hereby authorize Boone County Senior Services, Inc. or its affiliates to contact any person, firm, officer, corporation, association, organization, or institution to obtain any information, files, documents, records, or other information pertaining to my application for employment. This may include, but is not limited to, educational records and transcripts, public and legal records, background checks, and previous employment records.	
Signature	Date

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