



Weaving a tapestry of Love, Hope, &
Empowerment by embracing life together.

2233 Lower Hunters Trace
Louisville, KY 40216
Main: 502-719-0072

POSITION APPLIED FOR _____ DATE AVAILABLE IF HIRED _____

INDICATE WHICH TYPE OF EMPLOYMENT YOU ARE INTERESTED IN: ☐ FULL-TIME ☐ PART-TIME ☐ OTHER

PRINT OR TYPE ALL INFORMATION

NAME: (LAST)		(MI)	(FIRST)	
STREET		CITY	ST	ZIP CODE
PHONE: PREFERRED		EMAIL:		
DO YOU HAVE LEGAL RIGHT TO WORK IN US? <input type="checkbox"/> YES <input type="checkbox"/> NO				
ARE YOU OVER THE AGE OF 18? <input type="checkbox"/> YES <input type="checkbox"/> NO				

EDUCATION AND TRAINING

DO YOU HAVE A HIGH SCHOOL DIPLOMA OR GED? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF NOT, WHAT IS THE HIGHEST GRADE THAT YOU COMPLETED?
LIST ANY SPECIAL SKILLS THAT YOU FEEL WOULD HELP IN THE POSITION YOU ARE APPLYING FOR:

EDUCATION

LEVEL	NAME/LOCATION OF SCHOOL(S)	MAJOR	# OF CREDITS COMPLETED	DATES ATTENDED		TYPE OF DEGREE
HIGH SCHOOL				FROM	TO	
COLLEGE						
GRADUATE						

U.S. MILITARY RECORD

BRANCH	RANK AT DISCHARGE	TYPE OF DISCHARGE

SPECIALIZED TRAINING OR CLASSES RELEVANT TO THE JOB

TITLE OF PROGRAM/COURSE	COMPANY/SCHOOL	# OF CREDITS COMPLETED	DIPLOMA OR CERTIFICATE RECEIVED
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

WORK EXPERIENCE

LIST BELOW YOUR THREE MOST RELEVANT WORK EXPERIENCES, INCLUDING VOLUNTEER ACTIVITIES.

JOB NUMBER 1		
NAME OF EMPLOYER	EMPLOYER'S ADDRESS	
	STREET	
TYPE OF BUSINESS	CITY	ST ZIP CODE
JOB TITLE	SUPERVISOR'S NAME AND PHONE NUMBER	
DATES OF EMPLOYMENT	PERMISSION TO CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO	
JOB DUTIES		

JOB NUMBER 2		
NAME OF EMPLOYER	EMPLOYER'S ADDRESS	
	STREET	
TYPE OF BUSINESS	CITY	ST ZIP CODE
JOB TITLE	SUPERVISOR'S NAME AND PHONE NUMBER	
DATES OF EMPLOYMENT	PERMISSION TO CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO	
JOB DUTIES		

JOB NUMBER 3		
NAME OF EMPLOYER	EMPLOYER'S ADDRESS	
	STREET	
TYPE OF BUSINESS	CITY	ST ZIP CODE
JOB TITLE	SUPERVISOR'S NAME AND PHONE NUMBER	
DATES OF EMPLOYMENT	PERMISSION TO CONTACT <input type="checkbox"/> YES <input type="checkbox"/> NO	
JOB DUTIES		

HAVE YOU EVER BEEN CONVICTED OF ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? ☐ YES ☐ NO
A conviction record will not necessarily bar you from employment

I hereby voluntarily and knowingly authorize any and all past or present employers, supervisors, colleges, universities, or other institutions of learning, law enforcement agencies, state agencies, federal agencies, finance bureaus, collection agencies, private businesses, military branches or the National personnel Records Center, personal references, and/or other persons, to provide records or information they may have concerning me to Harbor House of Louisville Inc. I hereby voluntarily, knowingly and unconditionally release any named or unnamed informant from any liability resulting from the furnishing of this information. This information shall be valid one (1) year from the date signed or as long as I am employed by Harbor House of Louisville Inc.

I hereby affirm that this application (and accompanying resume) contains no willful misrepresentation or falsifications and that this information given by me is true and complete to the best of my knowledge and belief. I am aware that if hired, discovery at any time of misrepresentation or falsification on this application will be considered sufficient cause for dismissal. Harbor House of Louisville Inc is hereby authorized to make any investigation of my personal and professional history through any investigative agencies of its choice.

SIGNATURE

DATE