

## Personal Information

Last	First	MI	SSN#	Email		
Street Address		City	ST	Zip	Home Phone	Mobile Phone
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, Date of Birth	
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, please explain:			
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No			Branch	Rank at Discharge	Type of Discharge	
What position are you applying for?			If not honorable, explain:			
Employment Preference <input type="checkbox"/> Full time <input type="checkbox"/> Part time			Desired Salary	Date Available		
			How did you hear about this position?			

## Prior Work Experience

	Current or Most Recent		Prior		Prior	
Employer						
Address						
City, State, Zip						
Telephone						
Name of Immediate Supervisor						
Dates of Employment	From	To	From	To	From	To
Position/Job Title						
Pay	Starting	Ending	Starting	Ending	Starting	Ending
Duties						
Reason for Leaving						

## Education and Licensure

	Name, City, State	Last Year Complete	Did you graduate?	Major or Emphasis
High School		9 10 11 12	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College/University		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Advanced Degree			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Provide professional license and number and/or list any applicable special skills, training or proficiencies.				

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for PCC to send me an online consent request to conduct background check and for former employers to be contacted regarding work records.	Signature	Date
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