

Kalona Historical Society 715 D Ave Kalona, IA 52247 319-656-3232 kalonahistory@gmail.com

Employment Application

Applicant Information								
Full Name:						Date:		
	Last	First			M.I.			
Address:								
	Street Address					Apartment/Unit #		
	City				State	ZIP Code		
Di		_	,					
Phone:		E	-maii					
Date Available: Social Security No.:					Desired Salary:\$			
Position App	olied for:							
							NO	
Have you ev	ver worked for this compar	YES NO	If yes, v	when?_				
Have you ev	ver been convicted of a felo	YES NO ony?						
If yes, expla	in:							
Education								
High School	:	Address:						
From:	To:	_ Did you graduate?	YES	NO	Diploma:			
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 Full Name: Relationship: Phone: Company: Address: Full Name: Relationship: Company: Phone: Address: Relationship: Full Name: Company: Phone: Address: Previous Employment Phone: Company: Supervisor: Address: Ending Salary:\$ Job Title: Starting Salary:\$ Responsibilities: _____ To:____ From: Reason for Leaving: YES NO May we contact your previous supervisor for a reference? П Company: Phone: _____ Supervisor: Address: Job Title: Starting Salary:\$ Ending Salary:\$ Responsibilities: From: To: Reason for Leaving: YES NO May we contact your previous supervisor for a reference? Disclaimer and Signature I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. Signature: Date: