



**Previous Employment**

List your current or most recent employment first. Include work related internships, military and volunteer work.

<b>Name of Current/Most Recent Employer</b>		<b>Address</b>		<b>Telephone</b>
<b>Supervisor's Name &amp; Title</b>			<b>Position Held</b>	
<b>Dates of Employment</b>			<b>Rate of Pay</b>	
<b>From:</b> Mo.      Yr.	<b>To:</b> Mo.      Yr.	<b>Starting:</b> \$            per      (hr, wk, yr)	<b>Ending:</b> \$            per (hr, wk, yr)	
<b>Reason for Leaving:</b>				
<b>May We Contact Your Employer</b> Yes ___ No ___				

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<b>Supervisor's Name &amp; Title</b>			<b>Position Held</b>	
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<b>From:</b> Mo.      Yr.	<b>To:</b> Mo.      Yr.	<b>Starting:</b> \$            per      (hr, wk, yr)	<b>Ending:</b> \$            per (hr, wk, yr)	
<b>Reason for Leaving:</b>				
<b>May We Contact Your Employer</b> Yes ___ No ___				

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<b>Reason for Leaving:</b>				
<b>May We Contact Your Employer</b> Yes ___ No ___				

**List any Professional Affiliations to which you belong: (Optional)**


**Professional References**

Name	Company/Address	Phone	Relationship

***The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose:***

If this position requires driving, do you have a valid driver's license & access to an automobile?

Yes \_\_\_ No \_\_\_

If yes, License # & State Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_

Print Full Name: \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Print other names you have used: \_\_\_\_\_ Dates used: \_\_\_\_\_

Print other names you have used: \_\_\_\_\_ Dates used: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_ No \_\_\_ (If yes, please list details below)

List any time you were convicted with any violation, including traffic, but excluding parking?

Date	Place	Department	What Charges Did You Receive?	Fines and/or Penalties Complete?

***If any of the previous questions need additional explanations or entry space, please use separate sheet of paper and attach to application.***

## **Releases and Applicant's Signature**

**Verification:** I verify that the information I have provided on this application is true and accurate. I understand that any false or misleading information that I furnish on or in connection with this application for employment may result in rejection of my application or termination of my employment.

**Authorize and Release:** In connection with my application for employment, I understand that investigative background inquiries may be made on me including previous employers, schools, criminal convictions, motor vehicle, and other reports. These reports may include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I understand that SEICAA has a strong policy concerning alcohol and drug use and that before I become an employee of SEICAA, I will have to take and pass SEICAA's drug screening test. I also understand that during the course of my employment with SEICAA, I may be subject to drug and/or alcohol testing under certain conditions as defined by Agency policy. I release and agree to hold harmless any individual, company, business institution or government agency from all liability with regard to furnishing information to SEICAA. I agree to release and hold harmless SEICAA from all liability with respect to the receipt of such information. This authorization and consent shall be valid in original, fax, or copy form.

\_\_\_\_\_ **Initials**

**Employment-at-Will:** All hiring and employment at SEICAA is at-will. I understand this application is not an employment contract, nor can it be used to create one. Employment by SEICAA has no specific term and may be terminated by the employee or SEICAA with or without notice. I acknowledge that SEICAA has not made any promises or representations that differ from those contained in this paragraph.

**Documentation:** I understand I must provide satisfactory documents to establish my identity and right to work in the United States if I am offered a position with SEICAA, and that failure to provide this evidence will result in the termination of my employment.

**Confidential Information:** During and after any employment with SEICAA, I will not divulge or appropriate for my own use or for the use of others, except as SEICAA may authorize or direct, any knowledge or information obtained by me during my employment and considered by SEICAA confidential.

By signing this application form, I certify that I have read and agree to the terms of the above employment understanding.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Date**