



1 Village Plaza Way,
North Scituate, RI 02857

First Name: _____ M.I. _____

Last Name: _____

Address: _____

City: _____

State: _____

Cell: () _____ - _____

Alternate Number: () _____ - _____

E-mail: _____

Contact me by: Telephone: E-mail:

Have you ever worked for Moose Trackers in the past? Yes: No:

When: _____ Where: _____

Have you applied to Moose Trackers in the past? Yes: No:

Are you 16 years or older? Yes: No:

Are you legally eligible for employment in this country? (If hired, verification will be required by law) Yes: No:

Employment desired

Type of employment: Part Time: Seasonal:

Temporary:

Total hours available per week: _____

	M	T	W	TH	F	S	SU
From							
To							

Date available to start work: _____ / _____ / _____

Education background

High School:

School name: _____

City: _____

State: _____

Did You Graduate? _____ Years Completed _____

College:

School Name: _____

City: _____

State: _____

Did You Graduate? _____ Years Completed _____

Course of Study: _____

Other:

School Name: _____

City: _____

State: _____

Did You Graduate? _____ Years Completed _____

Course of Study: _____

Extracurricular Activities

(Sports, Clubs, Groups)

Employment History

(If applicable, please list your last 2 employers, listing most recent first)

Employer 1: _____

Street Address: _____

Job Title: _____

Supervisor, Title: _____

Phone Number: () _____ - _____

Date Started: ___/___/___ Date Left: ___/___/___

Rate/Salary Start: _____

Hourly: Weekly: Annually:

Rate/Salary End: _____

Hourly: Weekly: Annually:

Reason for leaving: _____

May we contact this employer?

Yes: No: Not Applicable:

Employer 2: _____

Street Address: _____

Job Title: _____

Supervisor, Title: _____

Phone Number: () _____ - _____

Date Started: ___/___/___ Date Left: ___/___/___

Rate/Salary Start: _____

Hourly: Weekly: Annually:

Rate/Salary End: _____

Hourly: Weekly: Annually:

Reason for leaving: _____

May we contact this employer?

Yes: No: Not Applicable:

References

(1 professional and 1 personal. Personal may be a family member)

Professional: _____

Relation: _____

Phone Number: () _____ - _____

Years Known: _____

Personal: _____

Relation: _____

Phone Number: () _____ - _____

Years Known: _____

Please Read the Section Below Carefully Before Signing:

I certify that I have read and fully completed this form and that the information contained herein is correct and to the best of my knowledge. I understand that any omission of false information is grounds for dismissal. I understand that as part of the procedure for my application for employment, I give the employer the right to investigate all references listed and the right to secure additional information about me, if job related. I agree that my signature on this application is binding and enforceable. I acknowledge and agree that signing this application, I wave all rights to dispute the validity of my signature on this application.

Various federal, state and local laws prohibit discrimination on account of race, color, religion, sex, age, national origin, disability, veteran status and other protected classes. It is Moose Trackers responsibility to comply fully with these laws, as applicable.

Signature of Applicant:

Date: _____/_____/_____