



**EMPLOYMENT EXPERIENCE** (starting with most recent)

Company _____	Dates _____
Address _____	City _____
Position _____	Supervisor _____
Wage _____	Reason for Leaving _____

  

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**WORK RELATED REFERENCES**

Name	Company & Title	Phone Number	Years Known

**AUTHORIZATION**

"I certify that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employees listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the American with Disability Act (ADA) and other relevant federal and state laws."

**DISCLAIMER**

The preceding job description has been designed to indicate the general nature and level of work performed by employees within this classification. It is not designed to contain or be interpreted as a comprehensive inventory of all duties, responsibilities, and qualifications required of employees assigned to this job.

**EQUAL EMPLOYMENT OPPORTUNITY**

Slurping Turtle strongly supports equal employment opportunity for all applicants regardless of race, color, sex, religion, marital status, national origin, citizenship status, age, sexual orientation or preference, medical condition (including pregnancy) or protected disability where it is unrelated to the ability to perform a job, or status as a Vietnam-era or special disabled veteran, or any other category prohibited by federal, state, or applicable local law, regulation or ordinance.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_