

PERSONAL REFERENCES

(Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number	Years of Acquaintance

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with our organization?

List below all present and past employment you had during the past 10 years (beginning with your most recent)

Name and Address of Company and Type of Business	From		To		Describe the work You did	Weekly Starting Salary	Weekly Ending Salary	Reason for Leaving	Name of Supervisor
	Mo	Yr	Mo	Yr					
Telephone									

Name and Address of Company and Type of Business	From		To		Describe the work You did	Weekly Starting Salary	Weekly Ending Salary	Reason for Leaving	Name of Supervisor
	Mo	Yr	Mo	Yr					
Telephone									

Name and Address of Company and Type of Business	From		To		Describe the work You did	Weekly Starting Salary	Weekly Ending Salary	Reason for Leaving	Name of Supervisor
	Mo	Yr	Mo	Yr					
Telephone									

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the Challenge Center is true, complete and correct. I expressly authorize, without reservation, the Challenge Center, its representative and agents to; contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of information provided by me in this application and I hereby waive any and all rights and claims I have regarding the gathering and use of such information in the employment process. I understand that the Challenge Center does not unlawfully discriminate in employment and no question on this application is used to limit or excuse an applicant from consideration for employment on a basis prohibited by applicable local, state or federal law. I understand that this application remains current for 2 months. I understand that any information provided by me that is false, incomplete or misrepresented, will be sufficient cause to cancel consideration or discharge. I certify that I have read, understood, and accept all terms of the Applicant Statement.

Signature of Applicant _____

Date _____