



A Better Way of Living

DEVELOP YOUR POTENTIAL

202 Central SE, Suite 300, Albuquerque, NM 87102; 505-332-9164; 505-332-9165 (Fax)

Application for Employment

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, or other protected classification.

Name _____ SSN _____ Date _____

Address: _____
 Street City State Zip

Telephone Number _____ Email Address _____

Are you over 18 years old? yes no

Are you authorized to work in the US on an unrestricted basis? yes no

How did you learn of this opening? _____

Have you worked here before? yes no If yes when? _____

Have you been told the essential functions of the job or have you been shown a copy of the job description listing the essential functions of the job? yes no

Can you perform these essential functions? yes no

Are there any hours, shifts, or days you cannot work? _____

Are you willing to work holidays? yes no

Shift preferred PRN (as needed) Part time (20-37.9 hrs per week) Full time (38 hrs per week)

Will you work overtime? yes no

EDUCATION	NAME/CITY OF SCHOOL	YEAR GRADUATED	MAJOR	DIPLOMA/DEGREE
High School				
College/ Univ.				
Post College				
Trade School				

Other Training/Education _____

POSITIONS APPLIED FOR 1. _____ 2. _____

Wage or salary desired? \$ _____ When can you start? _____

Were you referred to us? If yes, by whom? _____

Do you have a valid driver's license? yes no

Do you have valid car insurance? yes no

WORK HISTORY

List your last three employers starting with the most recent. Please include any non paid voluntary experience, which is related to the job for which you are applying. Please complete even if you attach a resume.

May we contact you present employer yes no

Most recent employer	Address	Telephone
Date Started:	Starting Salary: \$ per	Starting Position:
Date left:	Salary on leaving: \$ per	Position on leaving:
Name and Title of Supervisor:		
Description of Duties:		
Reason for leaving:		

Previous Employer	Address	Telephone
Date Started:	Starting Salary: \$ per	Starting Position:
Date left:	Salary on leaving: \$ per	Position on leaving:
Name and Title of Supervisor:		
Description of Duties:		
Reason for leaving:		

Previous Employer	Address	Telephone
Date Started:	Starting Salary: \$ per	Starting Position:
Date left:	Salary on leaving: \$ per	Position on leaving:
Name and Title of Supervisor:		
Description of Duties:		
Reason for leaving:		

REFERENCES: List three professional references, which you have known for at least one year:

Name	Address and phone #	Business	How do you know this person?

APPLICANT'S CERTIFICATION AND AGREEMENT: I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize A Better Way of Living, Inc. to make an investigation of any of the facts set forth in this application. I understand that employment with A Better Way of Living, Inc. is "at will" which means that either I or the organization can terminate the employment relationship any time, with or without prior notice, and for any reason not prohibited by statute. I authorize A Better Way of Living Inc to conduct a criminal background check and Adult Abuse check if I am hired.

Date _____ Applicant's Signature: _____