

**413 Mulberry Ave**

**Muscatine, IA**

**563-288-9000**

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| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | | | | |  | | | | | | | | | | | | | | First | |  | | | | | | | | | | | | | M.I. | | | Date | | | |  | |
| Street Address | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | Apartment/Unit # | | | | | | |  | |
| City |  | | | | | | | | | | | | | | | | | | State | |  | | | | | | | | | | | | | ZIP |  | | | | | | | |
| Phone |  | | | | | | | | | | | | | | | | | | E-mail Address | | | | |  | | | | | | | | | | | | | | | | | | |
| Date Available | | | | | |  | | | | | | | | | | Social Security No. | | | | |  | | | | | | | | | | Desired Salary | | | | | |  | | | | | |
| Position Applied for | | | | | | | | Site Coordinator: Satellite Tutor: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you a citizen of the United States? | | | | | | | | | | | | | | | YES | | NO | | | | If no, are you authorized to work in the U.S.? | | | | | | | | | | | | | | | | | | | YES | | NO |
| Have you ever worked for this company? | | | | | | | | | | | | | | | YES | | NO | | | | If so, when? | | | | |  | | | | | | | | | | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | | | | | | | | | YES | | NO | | | | If yes, explain | | | | |  | | | | | | | | | | | | | | | | |
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| Education | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| High School | | | | |  | | | | | | | | | | | | Address | | | |  | | | | | | | | | | | | | | | | | | | | | |
| From | |  | | | | | To | | |  | | Did you graduate? | | | | | YES | | | | NO | | | | Degree | | | | |  | | | | | | | | | | | | |
| College | |  | | | | | | | | | | | | | | | Address | | | |  | | | | | | | | | | | | | | | | | | | | | |
| From | |  | | | | | To | | |  | | Did you graduate? | | | | | YES | | | | NO | | | | Degree | | | | |  | | | | | | | | | | | | |
| Other | |  | | | | | | | | | | | | | | | Address | | | |  | | | | | | | | | | | | | | | | | | | | | |
| From | |  | | | | | To | | |  | | Did you graduate? | | | | | YES | | | | NO | | | | Degree | | | | |  | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| References | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list three professional references. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | | | |  | | | | | | | | | | | | | | | | | Relationship | | | | | | | |  | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | | | | | | | Phone | | | | |  | | | | | | | | | | | | | | | |
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| Full Name | | | | |  | | | | | | | | | | | | | | | | | Relationship | | | | | | | |  | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | | | | | | | Phone | | | | |  | | | | | | | | | | | | | | | |
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| Full Name | | | | |  | | | | | | | | | | | | | | | | | Relationship | | | | | | | |  | | | | | | | | | | | | |
| Company | | | | |  | | | | | | | | | | | | | | | | | Phone | | | | |  | | | | | | | | | | | | | | | |
| Previous Employment | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company | | | |  | | | | | | | | | | | | | | | | | | | Phone | | | | |  | | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | Supervisor | | | | | |  | | | | | | | | | | | | | | |
| Job Title | | |  | | | | | | | | | | | | | | | Starting Salary | | | | | $ | | | | | | | | | Ending Salary | | | | | | | $ | | | | |
| Responsibilities | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From |  | | | | | | To | | | |  | | | Reason for Leaving | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | YES | | | NO | | | | |  | | | | | | | | | | | | | | | |
| Company | | | |  | | | | | | | | | | | | | | | | | | | Phone | | | | |  | | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | Supervisor | | | | | |  | | | | | | | | | | | | | | |
| Job Title | | |  | | | | | | | | | | | | | | | Starting Salary | | | | | $ | | | | | | | | | Ending Salary | | | | | | | $ | | | | |
| Responsibilities | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From |  | | | | | | To | | | |  | | | Reason for Leaving | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | YES | | | NO | | | | |  | | | | | | | | | | | | | | | |
| Company | | |  | | | | | | | | | | | | | | | | | | | | Phone | | | | |  | | | | | | | | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | Supervisor | | | | | |  | | | | | | | | | | | | | | |
| Job Title | | |  | | | | | | | | | | | | | | | Starting Salary | | | | | $ | | | | | | | | | Ending Salary | | | | | | | $ | | | | |
| Responsibilities | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| From |  | | | | | | To | | | |  | | | Reason for Leaving | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | | | | | | | | | | YES | | | NO | | | | |  | | | | | | | | | | | | | | | |
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| Military Service | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Branch | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | From | | | |  | | | To | |  | | | | | |
| Rank at Discharge | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | Type of Discharge | | | | | | | | | |  | | | | |
| If other than honorable, explain | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Disclaimer and Signature | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I certify that my answers are true and complete to the best of my knowledge.  If this application leads to employment, I understand that false or misleading information in my application or interview  may result in my release.  Flickinger Learning Center is referred to as an “employment at will.” This means your employment can be terminated at any time, for any reason, with or without cause, with or without notice, by you or Flickinger Learning Center. You understand that your employment is “at-will,” and will acknowledge that no oral or written statements or representations regarding your employment can alter your at will employment status.The only exception to this policy is a written employment agreement approved at the discretion of the President or the Board of Directors, whichever is applicable. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | Date | | |  | | | | | | | |