



1 Sperti Drive, Edgewood, KY 41017
(859) 344-9322

APPLICATION FOR EMPLOYMENT
New Perceptions is an Equal Opportunity Employer

(Please print)

Personal Information

Name: _____ SS#: _____
Last First Middle

Current Address: _____
(number, street, city, county, state, and zip code)

Previous Address: _____

Phone #: _____ - _____ - _____ Email Address: _____

Can you show proof of age upon hire? yes no
Are you a current member in the U.S. Military, or a veteran? yes no
Are you eligible for employment in the U.S.? yes no
Have you been convicted of a crime? yes no
If yes, explain: _____

Work Desired

Full time Part time PRN/Temporary

What position are you applying for? _____

Are you willing to work some weekends? yes no Evenings? yes no

Were you previously employed by New Perceptions? yes no

Education, Training & Skills

	School Name & City/State	Number of Years Completed/ Graduation Date	Major Course Work	Degree Achieved
High School or G.E.D.				
Tech/Trade School				
College				
Graduate School				

Other Training/Certifications: _____
(include type of license/certification, name of licensing authority, most recent year of receipt)

Please share any additional qualifications/skills that may be relevant to the position you are applying for:

Employment History - Begin with the most recent position held.

Job Title: _____

Employer: _____

Address: _____

Duties & Responsibilities: _____

Dates of Employment:

____/____/____ to ____/____/____

Supervisor's Name:

Reason for leaving:

Job Title: _____

Employer: _____

Address: _____

Duties & Responsibilities: _____

Dates of Employment:

____/____/____ to ____/____/____

Supervisor's Name:

Reason for leaving:

Job Title: _____

Employer: _____

Address: _____

Duties & Responsibilities: _____

Dates of Employment:

____/____/____ to ____/____/____

Supervisor's Name:

Reason for leaving:

Professional References

Name	Occupation/ Relationship	Years Known	Contact Information

Applicant Understanding

I certify that all answers to the questions in this application are true and further understand that any false statement in this application will be sufficient grounds for rejection of the application of employment without notice at time hereafter. I authorize New Perceptions to make all necessary and appropriate investigations to verify the information contained within.

Signature of Applicant: _____ Date: ____/____/____