

Work History (begin with the most recent, and list all past employers, including any pertinent military experience)

Name of Company	Business address (street/city/state/zip)		Phone	
Type of business	Immediate supervisor		Dates employed From	To
Exact job title	Start Pay	End Pay	Reason for termination	
Description of duties				

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Type of business	Immediate supervisor		Dates employed From	To
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Affidavit

I certify that the answers given by me to the foregoing questions and statements are true and correct without consequential omissions of any kind whatsoever. I agree that the company shall not be liable in any respect if my employment is terminated because of falsity of statements, answers of omissions made by me in the questionnaire. I also authorize the companies, schools, or persons named above to give any information regarding my employment character and qualification. I hereby release said companies, schools, or persons from all liability for any damage for issuing this information. I certify that all statements and answers to questions about my health are true and were made by me without any reservations. I expressly waive all provisions of law prohibiting any physician, person, hospital, or other institution that has or may hereafter attend or furnish me with treatment from disclosing to the company any knowledge of information thereby acquired. I understand that any misleading or incorrect statements may render this application void, and if employed, would be cause for termination. I understand that there is no express or implied contract of employment and that if employed I have been hired at the will of the employer and that my employment may be terminated at will, at any time; and with or without cause the employer's only obligation being to pay salary or wages due and owing at the time of the termination. Finally, I understand that all company property must be returned and my indebtedness to the company must be paid before my termination. I authorize the company to deduct from my final paycheck(s) all monies due and owing to the company.

Signature _____ Date _____