AT-WILL APPLICATION FOR EMPLOYMENT

(An equal opportunity employer)

Section and the section of the secti					
		Date:			
Name		Social Sec Number:	curity		
Last	First Middle				
Address					
Street	City	C	tate Zip Code		
DI N	•		tate Zip Code		
Phone No.	Are you 18 years or olde	r? Yes 🗆	No 🗆		
Are you either a U.S. citizen or an alien au	athorized to work in the United State	s? Yes 🗆	No 🗆		
EMPLOYMENT DESIRED					
	Date you	9	alary		
Position	can start?		esired		
Are you employed now?	If so, may we inquire of your present employer	-0			
	or your present employer	7			
Ever applied to this company before?	Where?	W	hen?		
Referred by: EDUCATION					
Jame and Location of school	NIC				
Name and Location of school	Number of Years attended	Did you	Subjects studied		
8.6	Number of Years attended	Did you graduate?	Subjects studied		
Name and Location of school High School College or trade/business school		graduate?	Subjects studied		
ligh School			Subjects studied		
ligh School follege or trade/business school		graduate?	Subjects studied		
ligh School follege or trade/business school		graduate?	Subjects studied		
ligh School ollege or trade/business school ENERAL		graduate?	Subjects studied		
ligh School ollege or trade/business school ENERAL abject of special study or research work?		graduate?	Subjects studied		
cigh School college or trade/business school ENERAL abject of special study or research work?		graduate?	Subjects studied		
cigh School college or trade/business school ENERAL abject of special study or research work? decial skills?	Years attended	graduate?			
Tigh School College or trade/business school EENERAL ubject of special study or research work? pecial skills? ctivities (Civic, athletic, etc.)?		graduate?			

Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age

MCDOWELL COUNTY COMMISSION ON AGING, INC.

725 Stewart Street Welch, West Virginia 24801 (304) 436-6588 Fax (304) 436-2006

DATE:					
то:		RE:			
(Previous			(Applicant		
employer			name & — address) —		
address)					
Permission Statement: <i>1 h</i>	nereby give my permis	ssion for you to resp	ond to this requ	est for a reference	
check on me as your previ	ous employee.				
	Sig	gnature			
We would appreciate you whether on this form or a your convenience. Thank	separate sheet of pap	per. A stamped self-	addressed envel		nts,
Under what circumstances	s have you known our	applicant?			
Please rate the following o	characteristics:	Excellent	Good	Fair	Poor
Ability to get alor	ng with others				
Character					
Dependability					
Honesty					-
Initiative					
Motivation					
Responsibility					W.
Willingness to wo	ork				
s the applicant eligible for	re-hire to your facilit	γ?			
dditional comments:					
		Signa	nture	Dat	te

MCDOWELL COUNTY COMMISSION ON AGING, INC.

725 Stewart Street Welch, West Virginia 24801 (304) 436-6588 Fax (304) 436-2006

DATE:				
TO:	RE:			
(Previous		(Applicant		
employername &		name & — address) —	A	
address)		address)		
Permission Statement: I hereby give my permis	ssion for you to resp	ond to this reque	est for a reference	
check on me as your previous employee.				
Sig	gnature	=		
We would appreciate your honest appraisal of t	this individual. Pleas	se feel free to giv	ve us your commei	nts,
whether on this form or a separate sheet of page	per. A stamped self-	addressed envel	op is provided for	
your convenience. Thank you for your prompt of	nttention to this requ	uest.		
Under what circumstances have you known our	applicant?			
	1			
Please rate the following characteristics:	Excellent	Good	Fair	Poor
Ability to get along with others				
Character				
Dependability				
Honesty			8	
Initiative				
Motivation				
Responsibility				
Willingness to work				
Is the applicant eligible for re-hire to your facilit	w2			-
is the applicant engine for re-fine to your facilit				
Additional comments:				
	.8			
		120		
	Signa	ature	Da	te

MCDOWELL COUNTY COMMISSION ON AGING, INC.

725 Stewart Street Welch, West Virginia 24801 (304) 436-6588 Fax (304) 436-2006

DATE:				
TO: (Previous employer name &	RE:	(Applicant name & — address)		
address)		_		
Permission Statement: I hereby give my pe	ermission for you to resp	ond to this reque	st for a reference	
check on me as your previous employee.				
	Signature			
	al af this individual Blog	co fool from to giv	ie us vour commer	nte
We would appreciate your honest appraise				113,
whether on this form or a separate sheet o			op is provided joi	
your convenience. Thank you for your pror	npt attention to this req	uest.		
Under what circumstances have you know	n our applicant?			
Discourate the following characteristics:	Excellent	Good	Fair	Poor
Please rate the following characteristics:	Excellent	0000		
Ability to get along with others				
Character				
Dependability				
Honesty Initiative		-		
Motivation				1
Responsibility	_			
Willingness to work	_			
VIIIII.				
Is the applicant eligible for re-hire to your	facility?			
Additional comments:				
	Cia	nature	D:	ate
	Sigi	iature	De	