

EXPERIENCE: LIST ALL PREVIOUS EMPLOYERS (ATTACH ADDITIONAL SHEET IF NEEDED).HAVE YOU EVERY WORKED OR VOLUNTEERED AT SRN HPTC NEBCOA REFLECTIONS If yes, dates and position(s) held:

PRESENT OR LAST EMPLOYER	TITLE	FROM:	TO:
ADDRESS	DUTIES	PAY RATE:	
SUPERVISOR'S NAME/PHONE	MAY WE CONTACT THIS EMPLOYER?	REASON FOR LEAVING	
PRESENT OR LAST EMPLOYER	TITLE	FROM:	TO:
ADDRESS	DUTIES	PAY RATE:	
SUPERVISOR'S NAME/PHONE	MAY WE CONTACT THIS EMPLOYER?	REASON FOR LEAVING	
PRESENT OR LAST EMPLOYER	TITLE	FROM:	TO:
ADDRESS	DUTIES	PAY RATE:	
SUPERVISOR'S NAME/PHONE	MAY WE CONTACT THIS EMPLOYER?	REASON FOR LEAVING	

HOW DID YOU LEARN ABOUT OPPORTUNITIES AT SOUTHEAST REGIONAL NETWORK? NEWSPAPER _____
 WEBSITE _____ JOB FAIR/CAREER DAY _____ OTHER _____
 SRN HIGH POINT EMPLOYEE (NAME AND DEPARTMENT) _____

ARE YOU RELATED TO ANYONE IN OUR EMPLOY? No YES If "YES," Indicate Name/Position:**APPLICANT CERTIFICATION AND REFERENCE WAIVER** Please read carefully before signing:

I hereby affirm that the information provided on this application (and any resume submitted) is true and complete. I understand that any false or misleading representations or omissions may disqualify me from further consideration for employment and may result in discharge if discovered at a later date.

I hereby authorize Southeast Regional Network and Affiliates to investigate all information pertinent to my application in order to determine my qualifications for employment. I hereby authorize all persons and organizations having information relevant to my application to provide that information to Southeast Regional Network and Affiliates, and I hereby hold harmless Southeast Regional Network and its Affiliates and all those providing information to them from any liability arising out of or as a result of the provision or use of such information. I understand that any offer of employment may be rescinded if my references are inadequate or unacceptable to Southeast Regional Network and Affiliates.

I understand the completion of this application does not assure me a position with Southeast Regional Network or any of its Affiliates. I also understand that neither this application nor any other document constitutes a contract of employment for a specific term and that any employment relationship that may be established is "at will" and may be terminated at any time, with or without cause, by me or Southeast Regional Network and Affiliates.

I also understand that if employment is offered, it is contingent upon compliance with the requirements of The Immigration Reform and Control Act (I-9 Verification); results of a check of references satisfactory to Southeast Regional Network and Affiliates and results of a criminal record check (CORI) satisfactory to Southeast Regional Network and Affiliates.

We consider all applicants for positions without regard to race, color, religion, national origin, citizenship, age, mental or physical disabilities, veteran/reserves/National Guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

APPLICANT'S SIGNATURE: _____ DATE: _____