




Coyote Canyon Chapter

P.O. Box 257
Brimhall, NM 87310

Employment Application

Personal Information			
Full Name: (Last, First, M.I)		Date:	
Mailing Address: (City, State, ZIP)			
Phone #:		Email:	
Available Start Date:		Social Security #:	Desired Salary: \$
Position Applied for:			
Are you a registered voter? Yes No		Have you ever worked for this company? Yes No	
Do you have any medical disabilities? Yes No		If yes, what?	
Have you ever been convicted of a felony? Yes No		If yes, explain?	
Emergency Contact			
Name:	Relationship:	Phone #:	Work #:
Name:	Relationship:	Phone #:	Work #:
Education			
School:	From	To	Did you graduate?
Location	Type of Degree or diploma		
School:	From	To	Did you graduate?
Location	Type of Degree or diploma		
Other:	From	To	Did you graduate?
Location	Type of Degree or diploma		

References (Please list three professional references)			
Full Name:		Relationship:	
Company:		Phone #:	
Mailing Address: (City, State, ZIP)			
Full Name:		Relationship:	
Company:		Phone #:	
Mailing Address: (City, State, ZIP)			
Full Name:		Relationship:	
Company:		Phone #:	
Mailing Address: (City, State, ZIP)			
Previous Employment			
Company:		Phone #:	
Address: (City, State, ZIP)		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: (City, State, ZIP)		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: (City, State, ZIP)		Supervisor:	
Job Title:		Starting Salary: \$	Ending Salary: \$
Responsibilities:			
From:	To:	Reason for Leaving:	
May we contact your previous supervisor for a reference? Yes No			
Military Service			
Branch:		From:	To:
Rank at Discharge:		Type of Discharge:	
If other than honorable, explain:			
Disclaimer and Signature			
<p>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.</p>			
			
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Signature		Date	

<p><u>STAMP HERE (Office Use Only)</u></p>
