



Employment Application

840 Daniel Drive, Kokomo, IN 46901
 Doubting Thomas Coffee & Café 765.780.3094
 Cross America Community Center 765.780.3090
 Crossamerica.net | info@crossamerica.net

APPLICANT INFORMATION											
Last Name				First				M.I.		Date	
Street Address								Apartment/Unit #			
City				State				ZIP			
Phone				E-mail Address							
Date Available				Social Security No.				Desired Salary			
Position Applied for				PT <input type="checkbox"/> FT <input type="checkbox"/> Peak <input type="checkbox"/>				Desired Hours			
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?				
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain				
EDUCATION											
High School				Address							
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
College				Address							
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
Other				Address							
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree	
REFERENCES											
<i>Please list three professional references.</i>											
Full Name						Relationship					
Company						Phone					
Address											
Full Name						Relationship					
Company						Phone					
Address											
Full Name						Relationship					
Company						Phone					
Address											

PREVIOUS EMPLOYMENT			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I authorize Cross America to perform a Criminal Background Check.	<input type="checkbox"/>
I authorize Cross America to perform a routine Drug Screen	<input type="checkbox"/>
I certify that my answers are true and complete to the best of my knowledge.	<input type="checkbox"/>
If this application leads to employment, I understand that false or misleading information may result in my release.	<input type="checkbox"/>
Signature	Date