



Brain Injury Connections

of the Shenandoah Valley

APPLICATION FOR EMPLOYMENT

Resume is to be attached to this document

Position Applied for: _____

Date of Application _____ SSN: _____

Last Name _____ First _____ M.I. _____

Street Address _____

Apt. No. _____ City _____ State _____ Zip _____

Home Phone number _____ Cell Phone number _____

Email address _____

Do you possess a driver's license? If so, state and # _____

Are you legally eligible to work in the U.S.? Yes___ No___

If you are not a U.S. Citizen, are there restrictions on your eligibility? Yes___ No___

Are you able to perform the duties of the job for which you are applying with or without accommodation? Yes___ No___

Have you ever been convicted of any offense against the law? (Omit juvenile offenses and minor traffic violations. Include convictions by general court martial while in the military service.) Yes___ No___

If yes, give date, place, charge, court and fine or sentence.

A conviction does not automatically mean that you cannot be employed. What you were convicted of and how long ago are important. Give all the facts so that a decision can be made.

May we conduct a background check of your qualifications, character and record of employment?

Yes___ No___ If no, please explain.