



**PERSONAL INFO**

NAME (FIRST, LAST) \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_



**POSITION(S) APPLYING FOR**

\_\_\_\_\_

- FULL-TIME     PART-TIME     TEMPORARY
- MORNINGS     NIGHTS     WEEKENDS
- VOLUNTEER

**AVAILABLE START DATE:**

\_\_\_\_\_

**EDUCATION**

\_\_\_\_\_

HIGH SCHOOL NAME & LOCATION

\_\_\_\_\_

QUALIFICATION/DEGREE OBTAINED & SPECIALIZATION

\_\_\_\_\_

COLLEGE/UNIVERSITY NAME & LOCATION

\_\_\_\_\_

QUALIFICATION/DEGREE OBTAINED & SPECIALIZATION

\_\_\_\_\_

ADDITIONAL COURSES & LICENSES

\_\_\_\_\_



**WORK EXPERIENCE**

*Please list your work experience beginning with your most recent job held. If you were self-employed, please give business name.*

\_\_\_\_\_

NAME OF EMPLOYER

\_\_\_\_\_

ADDRESS

\_\_\_\_\_

PHONE # AND MAY WE CONTACT?

\_\_\_\_\_

REASON FOR LEAVING (BE SPECIFIC)

\_\_\_\_\_

JOB TITLE

\_\_\_\_\_

LIST RESPONSIBILITIES, SKILLS, ADVANCEMENTS...ETC.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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NAME OF EMPLOYER

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ADDRESS

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PHONE # AND MAY WE CONTACT?

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REASON FOR LEAVING (BE SPECIFIC)

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NAME OF EMPLOYER

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REASON FOR LEAVING (BE SPECIFIC)

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JOB TITLE

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LIST RESPONSIBILITIES,  
SKILLS, ADVANCEMENTS...ETC.

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ARE YOU A CITIZEN OF THE UNITED STATES?

YES

NO

ARE YOU AUTHORIZED TO WORK IN THE U.S.?

YES

NO

IF HIRED, DO YOU CONSENT TO A BACKGROUND CHECK?

YES

NO

ARE YOU A MEMBER OF THE WISCONSIN REGISTRY?

YES

NO

*If yes, at what level are you currently listed?*

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HAVE YOU EVER BEEN CONVICTED OF A FELONY?

YES

NO

*If yes, please provide details:*

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HAVE YOU EVER BEEN CONVICTED OF A CRIME?

YES

NO

*If yes, please provide details:*

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## REFERENCES

Please list below three persons not related to you who have knowledge of your work performance and/or personal qualifications within the last 5 years.

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NAME

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OCCUPATION

---

COMPANY NAME & ADDRESS

---

EMAIL

---

PHONE #

---

YEARS ACQUAINTED

---

NAME

---

OCCUPATION

---

COMPANY NAME & ADDRESS

---

EMAIL

---

PHONE #

---

YEARS ACQUAINTED

---

NAME

---

OCCUPATION

---

COMPANY NAME & ADDRESS

---

EMAIL

---

PHONE #

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YEARS ACQUAINTED

## APPLICATION FORM WAIVER - PLEASE READ CAREFULLY



*In exchange for the consideration of my job application by A Million Dreamz Inc (hereinafter called "the Company"), I agree that: I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.*

*I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy.*

*I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party. I understand that my employment is subject to passing a fingerprint background check per DCF regulation 13.03(2Xa).*

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SIGNATURE

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DATE