



2259 Jaggie Fox Way  
Lexington, KY 40511

# Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job medical condition or disability, or any other legally protected status. Reasonable accommodations will be made for persons with disabilities.

## Personal Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Can you prove your US Citizenship? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If not a US Citizen, give your visa number and expiration date: \_\_\_\_\_

## Position You Are Applying For

Title: \_\_\_\_\_ Salary Desired: \_\_\_\_\_  
Date You Can Start: \_\_\_\_\_ Are You Employed Now: \_\_\_\_\_ Yes \_\_\_\_\_ No  
Do you have a current Commercial Drivers License (CDL)? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If driving is a requirement of the job for which you are applying, have you received a moving violation, suspension, revocation, DWI, conviction, or any occurrence involving harm to anyone or property while driving in the past three years? \_\_\_\_\_ Yes \_\_\_\_\_ No

## Education

High School (Name, City, State) \_\_\_\_\_  
Graduation Date: \_\_\_\_\_ Highest Grade Completed \_\_\_\_\_  
Business or Trade School (Name, City, State) \_\_\_\_\_  
Dates Attended \_\_\_\_\_ Degree Earned \_\_\_\_\_  
Undergraduate College (Name, City, State) \_\_\_\_\_  
Dates Attended \_\_\_\_\_ Degree/Major \_\_\_\_\_  
Graduate School (Name, City, State) \_\_\_\_\_  
Dates Attended \_\_\_\_\_ Degree, Subject \_\_\_\_\_

## Work History (start with most recent)

Employer \_\_\_\_\_ Dates Employed \_\_\_\_\_  
Address \_\_\_\_\_  
Title \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Manager's Name & Title \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

May we contact the manager? \_\_\_\_\_ Yes \_\_\_\_\_ No

Employer \_\_\_\_\_ Dates Employed \_\_\_\_\_

Address \_\_\_\_\_

Title \_\_\_\_\_ Ending Salary \_\_\_\_\_

Manager's Name & Title \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact the manager? \_\_\_\_\_ Yes \_\_\_\_\_ No

Employer \_\_\_\_\_ Dates Employed \_\_\_\_\_

Address \_\_\_\_\_

Title \_\_\_\_\_ Ending Salary \_\_\_\_\_

Manager's Name & Title \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact the manager? \_\_\_\_\_ Yes \_\_\_\_\_ No

**References**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_

**Please Read and Sign**

I certify that answers given herin are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in theis application fo remployment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview is grounds for immediate dismissal. I understand also that I am required to abide by all rules and regulations of Kito USA.

Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_