

LIST VOLUNTEER OR INTERSHIP EXPERIENCES: _____

HOW MANY POINTS DO YOU HAVE ON YOUR DRIVING RECORD?

HAVE YOU EVER BEEN CONVICTED OF A D.W.I.? _____ **IF SO WHEN?** _____

HAVE YOU EVER BEEN FIRED OR ASKED TO RESIGN A POSITION? _____
IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER WORKED FOR ANY SKILL CREATIONS, INC. FACILITY? _____
IF YES, WHEN AND WHERE: _____

ARE YOU RELATED TO ANYONE CURRENTLY EMPLOYED BY SKILL CREATIONS, INC.?
_____ **IF YES, WHO?** _____ **WHAT LOCATION?** _____
(A positive answer will not necessarily bar employment.)

HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____ **IF YES, PLEASE GIVE THE DETAILS** _____
(A positive answer will not necessarily bar employment.)

HAVE YOU EVER BEEN A CAREGIVER, IN ANY CAPACITY, AT ANY FACILITIES OR INSTITUTIONS OTHER THAN YOUR WORK EXPERIENCE LISTED ON THE PREVIOUS PAGE?
IF YES, STATE WHERE AND WHEN: _____

AN OFFER OF AND ACCEPTANCE OF EMPLOYMENT BETWEEN SKILL CREATIONS, INC. AND THE EMPLOYEE DOES NOT CREATE NOR CONSTITUTE A CONTRACT FOR EMPLOYMENT, ONLY A RELATIONSHIP OF EMPLOYMENT AT WILL. PLEASE NOTE THAT A SBI CRIMINAL BACKGROUND SEARCH AND/OR NATIONWIDE CRIMINAL CHECK WILL BE REQUESTED UPON EMPLOYMENT WITH SKILL CREATION, INC. AND THAT EMPLOYMENT RETENTION IS CONTINGENT UPON SUCH REPORTS MEETING THE CRITERIA SET BY OUR POLICIES.

In signing this application for employment, I understand that any misleading, incorrect, or dishonest statement of facts is cause for immediate dismissal, if I am employed. I hereby authorize Skill creations, Inc. to investigate thoroughly, the information that I have shown on this application. Further, my signature on this application indicates my willingness to undergo drug screening, if I am employed.

Applicant's Signature

Date of Signature

SKILL CREATIONS, INC. IS AN EQUAL OPPORTUNITY EMPLOYER,
Providing employment opportunities to all persons without regard to gender, race, age,
national origin, religion, creed, color or disability.
