



**BRIGHT BEGINNINGS**  
 1810 Voorhies Ave Suite 10, Brooklyn, NY, 11235

## EMPLOYMENT APPLICATION

**PLEASE PRINT THE INFORMATION REQUESTED ON ALL PAGES AND SIGN WHERE INDICATED ON THE APPLICATION**

<b>PERSONAL DATA</b>	<b>NAME</b> LAST                                  FIRST                                  MIDDLE                                  YOUR SOCIAL SECURITY NUMBER		
	<b>PRESENT ADDRESS</b> STREET & NO                                  CITY/TOWN                                  STATE                                  ZIP                                  TELEPHONE NUMBER (    )		
	<b>MAILING ADDRESS</b> STREET & NO                                  CITY/TOWN                                  STATE                                  ZIP                                  TELEPHONE NUMBER (    )		
	IF YOU ARE UNDER AGE 18, PLEASE STATE YOUR AGE. _____	HAVE YOU EVER SERVED IN THE U.S. ARMED FORCES OR MERCHANT MARINES? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, GIVE SEPARATION DATE.	ONLY U.S. CITIZENS OR ALIENS WHO HAVE A LEGAL RIGHT TO WORK IN THE U.S. ARE ELIGIBLE FOR EMPLOYMENT. CAN YOU, UPON EMPLOYMENT PROVIDE GENUINE DOCUMENTATION ESTABLISHING YOUR IDENTITY AND ELIGIBILITY TO BE LEGALLY EMPLOYED IN THE UNITED STATES.? <input type="checkbox"/> YES <input type="checkbox"/> NO

<b>INTEREST AND AVAILABILITY</b>	<b>POSITION APPLYING FOR</b>	
	JOB TITLE	DEPARTMENT
	SCHEDULE:	DATE AVAILABLE TO START
	FOREIGN LANGUAGE PROFICIENCY SPEAK: _____ READ: _____ WRITE: _____	SALARY/RATE EXPECTED
	HOW WERE YOU REFERRED FOR THIS POSITION?	
	<input type="checkbox"/> JOB/COLLEGE FAIR    SPECIFY: _____ <input type="checkbox"/> SCHOOL POSTING    SPECIFY: _____ <input type="checkbox"/> EMPLOYEE REFERRAL    EMP. NAME: _____ <input type="checkbox"/> AGENCY    SPECIFY: _____ <input type="checkbox"/> NEWSPAPER/JOURNAL    SPECIFY: _____ <input type="checkbox"/> OTHER    SPECIFY: _____ <input type="checkbox"/> INTERNET SITE    SPECIFY: _____	

<b>EDUCATION</b>		NAME	CITY	STATE	DID YOU GRADUATE?	DATE DEGREE AWARDED	DEGREE	MAJOR
	High School							
	College/University							
	Graduate School							
	Other Schooling							

LIST ALL PERIODS OF EMPLOYMENT FOR THE LAST TEN YEARS OR LAST FOUR EMPLOYERS. START WITH YOUR MOST RECENT POSITION AND NOTE ANY PERIODS OF UNEMPLOYMENT. PLEASE INCLUDE ANY TEMPORARY, CONSULTING, OR INDEPENDENT CONTRACTOR WORK THAT YOU HAVE PERFORMED. PLEASE ATTACH ADDITIONAL PAPER IF NECESSARY.

EMPLOYMENT

EMPLOYER	FROM	TO	POSITION & DUTIES	HOURS WORKED
COMPANY NAME (PRESENT/MOST RECENT)	Mo/YR	Mo/YR	POSITION	HOURS WORKED PER WEEK
STREET AND No.			DUTIES	
CITY, STATE AND ZIP CODE	TELEPHONE No.			
NAME, TITLE OF IMMEDIATE SUPERVISOR AND PHONE NUMBER			REASON FOR LEAVING	
COMPANY NAME	Mo/YR	Mo/YR	POSITION	HOURS WORKED PER WEEK
STREET AND No.			DUTIES	
CITY, STATE AND ZIP CODE	TELEPHONE No.			
NAME, TITLE OF IMMEDIATE SUPERVISOR AND PHONE NUMBER			REASON FOR LEAVING	
COMPANY NAME	Mo/YR	Mo/YR	POSITION	HOURS WORKED PER WEEK
STREET AND No.			DUTIES	
CITY, STATE AND ZIP CODE	TELEPHONE No.			
NAME, TITLE OF IMMEDIATE SUPERVISOR AND PHONE NUMBER			REASON FOR LEAVING	
COMPANY NAME	Mo/YR	Mo/YR	POSITION	HOURS WORKED PER WEEK
STREET AND No.			DUTIES	
CITY, STATE AND ZIP CODE	TELEPHONE No.			
NAME, TITLE OF IMMEDIATE SUPERVISOR AND PHONE NUMBER			REASON FOR LEAVING	

<b>LICENSE/CERTIFICATION/SKILLS</b>	<b>IF PROFESSIONAL LICENSING IS REQUIRED (COMPLETE THIS SECTION)</b>		
	LICENSE No	STATE	EXPIRATION DATE
	HAS YOUR LICENSE EVER BEEN SUSPENDED OR REVOKED IN ANY STATE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
	IF YES, EXPLAIN IN DETAIL		
	_____		
	_____		
	_____		
<b>IF CERTIFICATION IS REQUIRED (COMPLETE THIS SECTION)</b>			
TYPE OF CERTIFICATION		NUMBER	
DATE ISSUED	EXPIRATION DATE		
<b>ADDITIONAL SKILLS (LIST ANY ADDITIONAL SKILLS WHICH MAY BE HELPFUL FOR THE POSITION FOR WHICH YOU ARE APPLYING)</b>			
_____			
_____			
_____			

<b>PROFESSIONAL REFERENCES</b>			
	NAME/ORGANIZATION	TITLE	TELEPHONE NUMBER
	NAME/ORGANIZATION	TITLE	TELEPHONE NUMBER
	NAME/ORGANIZATION	TITLE	TELEPHONE NUMBER

PLEASE READ CAREFULLY AND SIGN BELOW.

1. I HEREBY AFFIRM THAT THE INFORMATION ON THIS APPLICATION (AND ACCOMPANYING DOCUMENTS, IF ANY) IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE. I ALSO AGREE THAT ANY MISSTATEMENT, FALSIFICATION OF INFORMATION, OR OMISSION MAY DISQUALIFY ME FROM FURTHER CONSIDERATION FOR EMPLOYMENT AND/OR MAY BE CONSIDERED JUSTIFICATION FOR DISCHARGE REGARDLESS OF WHEN OR HOW DISCOVERED.
  
2. I UNDERSTAND THAT NOTHING IN THIS APPLICATION OR COMMUNICATION (WRITTEN OR ORAL), OR AN ACCEPTANCE OF EMPLOYMENT, CREATES AN EMPLOYMENT CONTRACT BETWEEN THE COMPANY AND ME. I UNDERSTAND THAT SHOULD I BE HIRED, MY EMPLOYMENT WOULD BE FOR NO FIXED DURATION AND COULD BE TERMINATED BY ME OR THE COMPANY AT ANY TIME WITH OR WITHOUT CAUSE, NOTICE OR PROCEDURAL REQUIREMENT. I FURTHER UNDERSTAND THAT NO ORAL OR WRITTEN STATEMENT TO THE CONTRARY SHALL CHANGE THIS RELATIONSHIP, AND NO REPRESENTATIVE OR AGENT OF THE COMPANY, HAS THE AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME OR TO MAKE ANY CHANGE IN ANY POLICY, PROCEDURE, BENEFIT OR OTHER TERM OR CONDITION OF EMPLOYMENT OTHER THAN IN A DOCUMENT SIGNED BY AN OFFICER OF THE COMPANY OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.
  
3. IF HIRED, AS A CONDITION OF EMPLOYMENT, I UNDERSTAND THAT WITHIN THREE BUSINESS DAYS BEGINNING ON THE DATE I REPORT TO WORK, I MUST DEMONSTRATE THAT I AM LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES.
  
4. I AUTHORIZE ALL PERSONS, SCHOOLS, COMPANIES, CORPORATIONS AND ORGANIZATIONS NAMED IN THIS APPLICATION (AND ACCOMPANYING DOCUMENTS, IF ANY), AND LAW ENFORCEMENT AGENCIES TO RELEASE ANY INFORMATION CONCERNING MY BACKGROUND, AND HEREBY RELEASE THEM AND BRIGHT BEGINNINGS , ITS AFFILIATES AND/OR ITS AGENTS, FROM ANY AND ALL CLAIMS OF LIABILITY IN LAW AND IN EQUITY THAT MAY ARISE OUT OF RELEASING SUCH INFORMATION.

AUTHORIZATION

\_\_\_\_\_  
NAME OF APPLICANT – PLEASE PRINT

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE OF APPLICATION

FEDERAL AND OTHER LAWS PROHIBIT DISCRIMINATION IN HIRING AND EMPLOYMENT ON THE BASIS OF RACE, CREED, SEX, RELIGION, AGE, COLOR, DISABILITY, MARITAL STATUS, NATIONAL ORIGIN, CITIZENSHIP STATUS, SEXUAL ORIENTATION, VETERAN STATUS OR ANY OTHER CLASSIFICATION AS PROTECTED BY LAW.