



Instructor Application

General Information

Full Name: _____
Last *First* *Initial*

Address: _____
Number and Street Name *Apartment / Unit #*

City *State* *ZIP Code*

Phone Number: _____

Area of Speciality: **Electrical** **Plumbing** **Carpentry** **Other**

Available to work: Check all that applies: 9:00am-12:00pm 1:00pm-4:00pm 6:00pm-9:00pm

Weekend

Are you legally eligible to work in the United States? Yes No *(If offered employment, you are required to provide documents that verify eligibility.)*

Have you ever been convicted of a felony? Yes No *(Conviction will not necessarily disqualify applicant from consideration.)*

If Yes, explain: _____

Education

High School

Diploma? Yes No

School Name: _____ City/State: _____

College and/or Vocational School

Degree Earned: _____

School Name: _____ City/State: _____

Education (continued)

List any special skills, qualifications, certifications, applicable course work or training:

Employment History

Please start with your present or most recent position.

Name of Employer: _____ Job Title: _____

Address: _____
City *State* *ZIP Code*

Phone Number: _____

Supervisor's Name and Title: _____

Dates Employed (From Month/Day/Year): _____ (To Month/Day/Year): _____

Describe the Work Performed: _____

Name of Employer: _____ Job Title: _____

Address: _____
City *State* *ZIP Code*

Phone Number: _____

Supervisor's Name and Title: _____

Dates Employed (From Month/Day/Year): _____ (To Month/Day/Year): _____

Describe the Work Performed: _____

Employment History (continued)

Name of Employer: _____ Job Title: _____

Address: _____
City _____ *State* _____ *ZIP Code* _____

Phone Number: _____

Supervisor's Name and Title: _____

Dates Employed (From Month/Day/Year): _____ (To Month/Day/Year): _____

Describe the Work Performed: _____

APPLICANTS CERTIFICATION AND ACKNOWLEDGEMENT

I acknowledge that the answers given in this application are true and complete to the best of my knowledge and authorize UVICELL to verify the accuracy of my statements and to obtain reference information regarding my work performance. I understand that the falsification, misrepresentation or omission of any facts in this document may result in denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I hereby authorize any current or past employers and references to provide information to UVICELL.

I UNDERSTAND THAT NOTHING SAID OR NO ACTIONS TAKEN DURING THE RECRUITMENT, APPLICATION OR INTERVIEW PROCESS SHALL BE DEEMED TO CONSTITUTE THE TERMS OF AN EXPRESS OR IMPLIED EMPLOYMENT CONTRACT.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Signature: _____ **Date:** _____

*Equal Employment Opportunity Statement
UVI CELL is proud to be an equal opportunity employer.
All qualified applicants will receive consideration without regard to race, color, religion,
gender, national origin, age, disability, veteran status or any other status or classification protected by law.*