



Applicant Name: _____

Date: _____

Employment Application

Please type and print, or write and use blue or black ink. A resume is not a substitute for this application. Please return to:

Fresh Start 6433 Havelock Ave. Lincoln, NE 68507 402-475-7777

Completed form may be emailed to: megd@freshstarthome.org

APPLICANT CONTACT INFORMATION

Name _____
Last First Middle Maiden

Address _____
Street City State Zip

Telephone _____ **Is this a:** Cell Number or Home Phone/Landline

2nd Phone _____ **Is this a:** Cell Number or Home Phone/Landline

Email Address _____ (please print clearly)

Driver's License # _____ **State of Issue** _____ **Exp. Date** _____

PROSPECTIVE EMPLOYMENT DETAILS

Desired Position _____ **Salary Desired** _____

Employment Desired (circle one) Full-Time Part-Time

Days / Hours Available to Work

Shifts: **1st** shift 7:30 am-5:30 pm | **2nd** shift Noon-10pm | **3rd** shift 9:45pm-7:45am

FT positions include more than one of these shifts. All positions include weekends.

Circle all shifts you are available for each day of the week.

Sun.	1	2	3	Thurs.	1	2	3
Mon.	1	2	3	Fri.	1	2	3
Tues.	1	2	3	Sat.	1	2	3
Wed.	1	2	3				

Date available to begin work: _____

How did you learn about this position? _____

Applicant Name: _____

Date: _____

If you are also providing a resume, you do not have to repeat information contained on it. Complete any sections NOT on the resume. For example, you may have included a job on a resume but not the wage information or reason for leaving.

EDUCATION

Did you graduate from high school or receive a GED Certification? Yes No				
Post-Secondary Education School Name and Location (college, business, nursing, vocational)	Field of Study Major / Minor		Did you graduate?	Degree or Diploma Earned
			Yes No	
			Yes No	
			Yes No	
Computer skills, related volunteer experience, and other education/training/skills:				

LICENSES OR CERTIFICATIONS

License/Certification	State	Profession	License/Certification #	Expiration Date

EMPLOYMENT HISTORY

Start with your current or most recent job.

May we contact your current or most recent employer for a reference? Yes No			
Employer	Telephone	Supervisor's Name	
Type of Business	Address		
Your Job Title	Dates of Employment (indicate month & years)	Hours worked per week	
	From: To:		
Duties			
Salary \$	per Hour or Year?	Reason for Leaving	



Applicant Name: _____

Date: _____

May we contact your current or most recent employer for a reference? Yes No		
Employer	Telephone	Supervisor's Name
Type of Business	Address	
Your Job Title	Dates of Employment (indicate month & years) From: To:	Hours worked per week
Duties		
Salary \$	per Hour or Year?	Reason for Leaving

May we contact this employer for a reference? Yes No		
Employer	Telephone	Supervisor's Name
Type of Business	Address	
Your Job Title	Dates of Employment (indicate month & years) From: To:	Hours worked per week
Duties		
Salary \$	per Hour or Year?	Reason for Leaving

May we contact this employer for a reference? Yes No		
Employer	Telephone	Supervisor's Name
Type of Business	Address	
Your Job Title	Dates of Employment (indicate month & years) From: To:	Hours worked per week
Duties		
Salary \$	per Hour or Year?	Reason for Leaving

If necessary, attach a list of other employers or a resume.



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Military Service

Have you ever been in the armed forces? ☐ Yes ☐ No

If yes, which branch? _____

Years of service (#) ____ Date entered ____ Discharge Date _____

Citizenship

To be an employee of Fresh Start, you must be a citizen of the United States or have authorization from the Immigration and Naturalization Service to work.

Are you a United States Citizen? ☐ Yes ☐ No

If no, do you have Employment Authorization? ☐ Yes ☐ No (please attach a copy)

If no, do you have form I-94? ☐ Yes ☐ No (please attach a copy)

Personal Disclosure

Have you ever received a ticket, been charged with an offense, or been arrested for anything other than a minor traffic violation? ☐ Yes ☐ No

If you are unsure if a ticket, a charge, or an arrest was for a minor traffic violation, answer "Yes".

Convictions are not an absolute bar to employment but will be considered in relationship to the job requirements.

If you answered "Yes" to the disclosure above, which, if any, of the following apply to your situation? *Check all that apply.*

- a) felony ☐ Yes ☐ No
- b) rape, including statutory rape, or any other sexual assault ☐ Yes ☐ No
- c) sexual conduct with a minor of any kind ☐ Yes ☐ No
- d) abuse of a minor of any kind ☐ Yes ☐ No
- e) public indecency ☐ Yes ☐ No
- f) shoplifting or other theft ☐ Yes ☐ No
- g) assault or battery ☐ Yes ☐ No

Please provide any comments or description you would like and fully explain any responses of "yes" above. *If you answered "Yes" to the disclosure question above, you must explain each situation including location(s), date(s), and the outcome of each ticket, charge, or arrest.*

References (3 minimum)

List below names, phone numbers, and addresses of persons who are qualified to answer questions concerning your qualifications for the position you seek. *Please use only professional references, **not** relatives or friends.*



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Date: _____

Reference 1

Name	
Position	
Company	
Address	
Phone	1st 2nd
Email address	

Reference 2

Name	
Position	
Company	
Address	
Phone	1st 2nd
Email address	

Reference 3

Name	
Position	
Company	
Address	
Phone	1st 2nd
Email address	

I certify that all information contained in this application and any attachments is true and complete to the best of my knowledge. I understand that any willful misrepresentation, false statement, or omission by me in the application or interview process may be cause for rejection of my application or termination of my employment. I authorize investigation of all statements made on this application and any attachments, and I release all persons, companies, and organizations from liability for providing or receiving such information. I further understand that this employment application and other employment related documents are not a contract of employment; and, that any oral or written statements to the contrary are hereby expressly disavowed. A typed name is considered a signature.

Signature of Applicant

Date

Last updated August 2026.

