



Attn: Human Resource
 2900 Red Fox Run
 Portage, WI 53901

Renewal Unlimited, Inc.
Application For Employment

Phone:(608) 742-5329
 1-(800) 344-7543
 Fax:(608) 742-5481

Position(s) Applied For:			Date of Application:
Last Name	First	Middle	
Living (Street)	City	Zip	Home Phone:
Mailing (P.O. Box)	City	Zip	Business Phone:

Have you ever applied for employment with us? Yes No If yes, Month/Year ____/____
 Position: _____

Are you legally eligible for employment in the United States? Yes No

Please list other special training or skills you have acquired which may be important to this job?

Do you have access to reliable means of transportation for agency business? Yes No

Do you have a valid Wisconsin Driver's License? Yes No If no, do you have access to a reliable driver with a valid Wisconsin licensure of the vehicle and driver who could transport you for agency business? Yes No

How did you learn of our organization, and the position in which you are applying for?

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School	Name/Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or Diploma
College					
High School					
Elementary School					
Other					

Please list other training programs you have attended?

Please List Two Personal References:

Name			Relationship/Years Known:
Living (Street)	City	Zip	Phone Number:
Name			Relationship/Years Known:
Living (Street)	City	Zip	Phone Number:

Please give an accurate, complete full-time and part-time employment record. Start with your present or most recent employer. If you need additional space, please continue on a separate sheet of paper.

Company Name:		Telephone Number:
Address:	Name of Supervisor:	Employed (Month & Year) From To
State Job Title and Describe Your Work:		
Starting Pay:	Last Pay:	Reason For Leaving:

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Address:	Name of Supervisor:	Employed (Month & Year) From To
State Job Title and Describe Your Work:		
Starting Pay:	Last Pay:	Reason For Leaving:

The information provided in this Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application or interview(s) may result in my dismissal at any time during employment.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision and thereafter as determined necessary during employment. I also authorize all employment and reference checks to be completed. I understand that this application is not and is not intended to be a contract of employment.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I understand, also, that I am required to abide by all rules and regulations of the company.

Signature of Applicant
07/29/2002*

Date