



TLC CARE SERVICES INC.
 9902 FARM POND ROAD
 LAUREL MD 20708
 TEL: 301-509-3367
 FAX: 301-604-0060
 E-MAIL: info@tlccareservices.com

Employment Application

Applicant Information

Full Name: Date:

Last
First
M.I.

Address:

Street Address
Apartment/Unit #

City
State
ZIP Code

Phone: E-mail Address:

Date Available: Social Security No.: Desired Salary: \$

Position Applied for:

Are you a citizen of the United States? YES No If no, are you authorized to work in the U.S.? YES No

Have you ever worked for this company? YES No If yes, when?

Have you ever been convicted of a felony? YES No

If yes, explain:

Education

High School: Address:

From: To Did you graduate? YES No Degree:

College: Address:

From: To Did you graduate? YES No Degree:

Other: Address:

From: To Did you graduate? YES YES Degree:

References

Please list three professional references.

Full Name: Relationship:

Company: Phone: ()

Address:

Full Name: Relationship:

Company: Phone: ()

Address:

Full Name: Relationship:

Company: Phone: ()

Address:

Previous Employment

Company: Phone: ()

Address: Supervisor:

Job Title: Starting Salary: \$ Ending Salary: \$

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? YES No

Company: Phone: ()

Address: Supervisor:

Job Title: Starting Salary: \$ Ending Salary: \$

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? YES No

Company: Phone: ()

Address: Supervisor:

Job Title: Starting Salary: \$ Ending Salary: \$

Responsibilities:

From: To: Reason for Leaving:

May we contact your previous supervisor for a reference? YES No

Military Service

Branch: From: To:

Rank at Discharge: Type of Discharge:

If other than honorable, explain:

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: Date: