



Mark Twain Home Foundation
 120 N Main St
 Hannibal MO 63401
Employment Application

Personal Information

Last Name	First	Middle	Today's Date
Street Address			Home phone
City, State, Zip			Cell Phone
Have you ever worked for us before? if yes, when and what was your position?			Social Security #
Position you are applying for:			Pay Expected
Are you available for full-time work?	Are you available for weekend work?		Will you work overtime if asked?
Are you legally eligible for work in the United States?			When are you available to start?

Education

School	Name/City	Course of Study	Graduate?	# of Years	Degree or Diploma?
Graduate					
College					
Business/Trade					
High School					

Employment History (Please start with your most recent Employer)

Company Name	Phone #: () -
Address	Employment Dates: Start: Last:
Name of Supervisor	Pay Rate: Start: Last:
Job Title & Description of Duties:	Reason for Leaving:

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Address	Employment Dates: Start: Last:

Name of Supervisor	Pay Rate: Start: Last:
Job Title & Description of Duties:	Reason for Leaving:

Military Service

Did you serve in the US Armed Forces?
If yes, in what branch did you serve?
Please describe any training received that would be relevant to the position you are applying for.

Professional References

Name	Title/Place of Employment	Phone Number

*The Mark Twain Home Foundation is an Equal Opportunity Employer.
In accordance with federal law we are prohibited from discrimination
on the basis of race, sex, color, national origin, age or disability.*

Please Read & Sign Below

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer of the company has any authority to inter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in writing signed by an officer.

In making this application for employment I authorize you to make an investigative consumer report whereby information is obtained through personal interviews with my neighbors, friends, or with other whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics, and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigative report is made.

Signature of Applicant

Date