Applicant Information			
Full Name:	Date of Bi	rth: Po	osition Applying for:
Address:			
Phone Number:		May we	text you at this number? Yes No
Email:	How did you di	scover this job?	
Do you know any current or J	previous LebCC employees? If	so, please name them	
Have you worked at LebCC p	reviously?	Acknowledge a drug test	may be required:
Have you ever been convicted	l of a felony? Yes No	If yes, please explain	
Are you a U.S. citizen? T	es 🗍 No If no, are you au	thorized to work in the U	J.S.? Yes No
Highest Level of Education:	4-year Degree 2-year	r Degree	ool 🔲 In school now
Please list any information relevant to the position for which you are applying, including skills, experience, or certifications, as well as qualifications which should be considered such as hobbies, volunteer positions, etc.			
	Previous Employment	t - Please list 3 mos	st relevant
	Employer #1	Employer #2	Employer #3
Comapny Name:			
- Comaphy Numer			
Position:			
Responsibilities:			
-	-		
Dates of Employment:			
Declaration			
By submitting this applicate statements may disqualify	tion, I confirm that the informe from employment.	mation provided is accu	rate, and I understand that any false
	I - J		
Signature			