

List your last three employers with the most recent first. If you are currently employed, may we contact your employer? Yes No

Date Employed Mo Day Year			Starting Salary/Wage \$	Present/Last Employer	
From:			Ending Salary/Wage \$	Phone #	City, State
To:					
Supervisor's Name				Supervisor's Title	
Your Title					
Reason for Leaving					

Date Employed Mo Day Year			Starting Salary/Wage \$	Previous/Last Employer	
From:			Ending Salary/Wage \$	Phone #	City, State
To:					
Supervisor's Name				Supervisor's Title	
Your Title					
Reason for Leaving					

Date Employed Mo Day Year			Starting Salary/Wage \$	Previous Employer	
From:			Ending Salary/Wage \$	Phone #	City, State
To:					
Supervisor's Name				Supervisor's Title	
Your Title					
Reason for Leaving					

PROFESSIONAL REFERENCES (PLEASE LIST ONLY REFERENCES WE MAY CONTACT AT THIS TIME)

Name	Title and Professional Relationship	Phone Number and Extension	
			<input type="checkbox"/> Home <input type="checkbox"/> Work
			<input type="checkbox"/> Home <input type="checkbox"/> Work
			<input type="checkbox"/> Home <input type="checkbox"/> Work

APPLICANT RELEASE

I understand that Youth Science Institute requires certain information about me to evaluate my qualifications for employment and to conduct its business if during the process I become an employee. Therefore, I authorize Youth Science Institute to investigate my past employment, education credentials, DMV records, criminal records (if any), reference checks and other employment-related activities. I agree to cooperate in such investigations and I hereby release those parties supplying such information to Youth Science Institute from all liability of responsibility with respect to information supplied.

I understand this application is only valid for the position applied for at present and that Youth Science Institute is not obligated to retain or consider this application for future openings. I also understand that if I am hired I will not be free to hold or accept employment with others which would create a conflict of interest with my employment by Youth Science Institute.

MY SIGNATURE BELOW CERTIFIES THAT I HAVE READ AND UNDERSTAND AND AGREE TO THE FOREGOING AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE INFORMATION ON THIS FORM IS TRUE AND CORRECT. IF I HAVE ATTACHED A RESUME IN LIEU OF COMPLETING SOME OF THIS APPLICATION, I REPRESENT THAT MY RESUME IS A COMPLETE RECORD OF MY EDUCATION, TRAINING AND WORK HISTORY AND THE INFORMATION ON MY RESUME IS TRUE AND CORRECT. I UNDERSTAND THAT SHOULD YOUTH SCIENCE INSTITUTE LEARN OF ANY MISREPRESENTATIONS OF FALSE INFORMATION PROVIDED BY ME, CONSIDERATION OF MY APPLICATION WILL TERMINATE IMMEDIATELY, OR IN THE EVENT I HAVE ALREADY BEEN HIRED, MY EMPLOYMENT WILL TERMINATE IMMEDIATELY.

Unless I specifically said "no," I agree that Youth Science Institute may contact my present and past employers to check this information and any matter related to my employment. I also authorize any person or company to give Youth Science Institute any information that it requests about me. I waive and release all persons and companies from any liability or damages that may result from the use, disclosure, or release of this information, whether it's favorable or unfavorable to me.

I understand that if Youth Science Institute hires me, I will be an at-will employee with no agreement about the length of my employment. Either Youth Science Institute or I may end the employment relationship at will, any time, with or without cause, and with or without notice. If I agree to submit to the optional YSI's Alternative Dispute Resolution Policy, all disputes and claims arising out of this application and, in the event that I am hired, all disputes and claims arising out of my employment will be settled accordingly. This agreement includes every type of dispute that may be lawfully submitted to arbitration, including claims of wrongful discharge, discrimination, harassment, or any injury to my physical, mental, or economic interests. This means that a neutral arbitrator, rather than a court or jury, will decide the dispute and as such, I would be waiving my right to a court or jury trial. Upon signing the agreement, I would agree that any arbitration will be conducted in accordance with Youth Science Institute's Alternative Dispute Resolution Policy.

Applicant Signature

Date of Application

revised 8/12/09