



EMPLOYMENT APPLICATION

Keji Services Staffing, LLC is an Equal Opportunity Employer and an Affirmative Action Employer. Keji is committed to excellence through diversity.

Each application section must be **FULLY COMPLETED** to be considered, even if a resume is attached. Answer **N/A** if a question does not pertain to the position you are applying for.

Personal Information

PLEASE PRINT OR TYPE

Date				
Last Name		First Name		Middle Name
Street Address		City	State	Zip
Phone Number	Mobile Number	Email Address		
Are You A U.S. Citizen?		Will You Accept Employment That Will Include Travel?		
Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>		
Are You 18 Years Of Age Or Older?		If Less Than Age 18, Will You Be Able To Provide A Work Permit If Employed?		
Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>		
If Selected For Employment, Are You Willing To Submit To A Pre-Employment Drug Screening Test?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Can You Provide Documentation Of Your Identity And Eligibility To Work In The United States?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Can You Perform, With Or Without Accommodation, The Essential Functions Of The Position For Which You Are Applying?			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do You Have A Valid Driver's License? <i>(For Driving Related Positions ONLY)</i>			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have You Ever Been Discharged From Any Employment / Position Or Asked To Resign? If Yes, Please Explain:			Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have You Ever Been Convicted Of A Felony? If Yes, Please Explain:			Yes <input type="checkbox"/>	No <input type="checkbox"/>

NOTE: Keji supports North Carolina's Fair Chance Law. An applicant will not be denied employment based solely on the grounds of a conviction for a criminal offense. The requirements of Keji's clientele, the type of offense, and the date and relevance of the criminal conviction to the position applied for will be considered in the employment decision.

Position

Position(s) You Are Applying For		Available Start Date		Desired Pay \$ Hourly Annually	
Type Of Employment Desired					
<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> On-Call	<input type="checkbox"/> Seasonal/Temporary		
Shift Availability					
<input type="checkbox"/> Day	<input type="checkbox"/> Evening	<input type="checkbox"/> Nights	<input type="checkbox"/> Weekends	<input type="checkbox"/> Holidays	

Education

Type	School Name & Location	Major Course of Study	Did You Graduate?		Degree Earned
High School			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Undergraduate College or University			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Graduate or Professional School			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Trade, Vocational or Other Training			Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Professional License & Certification Information

Current Professional Discipline	
Specialty	
Original State of Licensure	
License Number	
License Expiration Date	

Has The License Listed Above Been Subject To Any Disciplinary Action, Suspension, Or Revocation? Yes ☐ No ☐

If Yes, Please Explain, In Detail, The Reason For The Disciplinary Action, Suspension, Or Revocation.

--	--	--	--	--	--

LIST ANY ADDITIONAL PROFESSIONAL LICENSES OR CERTIFICATIONS

License Type or Name of Professional Certification	License or Certification Number	State	Active?		Expiration Date	Has The License Or Certification Ever Been Subject To Disciplinary Action, Suspension, Or Revocation?	
			Yes <input type="checkbox"/>	No <input type="checkbox"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/>
			Yes <input type="checkbox"/>	No <input type="checkbox"/>		Yes <input type="checkbox"/>	No <input type="checkbox"/>

If Yes, Please Explain, In Detail, The Reason For The Disciplinary Action, Suspension, Or Revocation.

List Membership In Any Professional Organizations (Name | Title) Which Are Directly Related To The Position You Are Applying For.

Employment History

Present Or Most Recent Employer	Job Title		Dates Employed
Work Phone	Starting Wage Pay Rate		Ending Wage Pay Rate
Fax Number	Supervisor's Name		Supervisor's Title
Address	City	State	Zip
Employer (2)	Job Title		Dates Employed
Work Phone	Starting Wage Pay Rate		Ending Wage Pay Rate
Fax Number	Supervisor's Name		Supervisor's Title
Address	City	State	Zip
Employer (3)	Job Title		Dates Employed
Work Phone	Starting Wage Pay Rate		Ending Wage Pay Rate
Fax Number	Supervisor's Name		Supervisor's Title
Address	City	State	Zip
Employer (4)	Job Title		Dates Employed
Work Phone	Starting Wage Pay Rate		Ending Wage Pay Rate
Fax Number	Supervisor's Name		Supervisor's Title
Address	City	State	Zip

Employer (5)	Job Title		Dates Employed
Work Phone	Starting Wage Pay Rate		Ending Wage Pay Rate
Fax Number	Supervisor's Name		Supervisor's Title
Address	City	State	Zip

Professional References

Name	Title	Company	Phone

Signature

I understand that consideration for employment through Keji Services Staffing, LLC will be contingent upon the results of reference and criminal background checks. I authorize Keji Services Staffing, LLC to investigate all information I provide on this employment application, including previous employment, experience, and educational credentials. I also give Keji Services Staffing, LLC permission to contact my former employer(s), all listed references, or any other person(s) who can verify the information I provide on this employment application. I hereby authorize and direct my current and former employers and other contacted persons to respond to any questions pertaining to the information included on this application.

Name (Print)	Signature
Social Security Number	
Date	