



### Applicant Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
First M.I. Last

Preferred Name: \_\_\_\_\_ Preferred Pronouns: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
\_\_\_\_\_  
City State Zip Code

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Desired Start Date: \_\_\_\_\_ Desired Pay: \_\_\_\_\_

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 Trellis ABA Therapy, LLC?  Yes  No  
If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No  
If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

Are you able to pass an Enhanced Background Check?  Yes  No  
If no, please explain: \_\_\_\_\_  
\_\_\_\_\_

## Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Degree: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? Yes  No  Degree: \_\_\_\_\_

## Employment History

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Pay Rate: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor's Name and Title: \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

May we contact them? \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Pay Rate: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor's Name and Title: \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

May we contact them? \_\_\_\_\_

Employer: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Pay Rate: \_\_\_\_\_

Address: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor's Name and Title: \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

May we contact them? \_\_\_\_\_

### References

Please list three professional references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I certify that all statements provided in the application are true and complete to the best of my knowledge. Any misrepresentation or omission may be grounds for rejection or dismissal if employed.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_