

**Autism Consultation & Treatment Center**  
301 West Main Street • Thurmont, MD 21788 • 301-271-0400

**Employment Application**

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

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

Phone Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Are you legally entitled to work in the United States? \_\_\_\_\_

Are you 18 years of age or older? \_\_\_\_\_

What position are you applying for? \_\_\_\_\_

Where did you hear about our company? \_\_\_\_\_

If you are hired, when can you start work? \_\_\_\_\_

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**Education**

High School:

Name of School: \_\_\_\_\_

Location: \_\_\_\_\_

Number of years attended: \_\_\_\_\_

Did you graduate? \_\_\_\_\_

Trade School:

Name of School: \_\_\_\_\_

Location: \_\_\_\_\_

Number of years attended: \_\_\_\_\_

Did you graduate? \_\_\_\_\_

College and Post Graduate:

Name of School: \_\_\_\_\_

Location: \_\_\_\_\_

Number of years attended: \_\_\_\_\_

Did you graduate? \_\_\_\_\_

What degree? \_\_\_\_\_

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Name of School: \_\_\_\_\_

Location: \_\_\_\_\_

Number of years attended: \_\_\_\_\_

Did you graduate? \_\_\_\_\_

What degree? \_\_\_\_\_

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## Employment History

Beginning with your *most recent* employment and working back in time, please give the following information:

Employer: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Job Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Job Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Job Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Job Title: \_\_\_\_\_

Duties: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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## Personal References

Please provide the names of two references that have not employed you and are not related to you.

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

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

Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

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

Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

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## Additional Qualifications

Please tell us about any other training, education, skills, or achievements that you feel should be considered.

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By signing below I assert that my answers are true and complete. I understand that if I am hired, any false or incomplete statements in this application will be grounds for immediate discharge. (If you are submitting this over the Internet and are unable to sign, you will be asked to sign during your interview).

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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