



**POST-GRADUATE EDUCATION**

**College/University**

**Years of Attendance**

**Degree**

\_\_\_\_\_  
\_\_\_\_\_

Area of Concentration: \_\_\_\_\_

If you do not have a Post-Graduate Degree, are you presently enrolled in a Post-Graduate Program? \_\_\_\_\_ (Yes/No)

College/University: \_\_\_\_\_

Area of Concentration: \_\_\_\_\_ Hours Completed: \_\_\_\_\_

List the College/University activities that you participated in and the honors you received: \_\_\_\_\_

**OTHER TRAINING**

Please list other training or workshops completed in the last five (5) years. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

If you need additional space, please complete your answer on a separate sheet and attach it to this application.

**PRIOR EXPERIENCE (Begin with most recent.)**

(1) \_\_\_\_\_  
Company/Organization (mm/yy – mm/yy) (Name of Supervisor)  
\_\_\_\_\_  
(Street Address) (City) (State) (Zip)  
Duties and responsibilities  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

(2) \_\_\_\_\_  
Company/Organization (mm/yy – mm/yy) (Name of Supervisor)  
\_\_\_\_\_  
(Street Address) (City) (State) (Zip)  
Duties and responsibilities  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

(3) \_\_\_\_\_  
Company/Organization (mm/yy – mm/yy) (Name of Supervisor)  
\_\_\_\_\_  
(Street Address) (City) (State) (Zip)  
Duties and responsibilities  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_



**REFERENCES**

Name _____	Title _____
Address _____	Phone No. _____
_____	Years Acquainted _____
Relationship _____	
Name _____	Title _____
Address _____	Phone No. _____
_____	Years Acquainted _____
Relationship _____	
Name _____	Title _____
Address _____	Phone No. _____
_____	Years Acquainted _____
Relationship _____	

**THE H GROUP OF KENTUCKY reserves the right to confer with persons listed by you as a reference, or with any other individuals, with knowledge concerning your total qualifications for the position. THE H GROUP OF KENTUCKY will not inquire into your financial status, religious affiliation, marital status, or on other matters unrelated to your qualifications to fill the position for which you applied. Information received from such inquiries will be used solely for determining your employability with THE H GROUP OF KENTUCKY and for no other purpose. This information will not be shared with anyone other than those THE H GROUP OF KENTUCKY representatives involved in the selection process. Unless you are willing to authorize THE H GROUP OF KENTUCKY to check references, your application will not be considered.**

I hereby consent to having THE H GROUP OF KENTUCKY contact anyone that it deems appropriate to investigate or verify any information I have given, or to discuss my background, past performance, or suitability for employment. I further consent to being discussed by any person so contacted and I waive all rights to bring any action for defamation, invasion of privacy, or any similar cause against anyone contacted as a result of what he or she may say about me.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

Because of my existing employment, I request that such contacts and inquiries be delayed until after \_\_\_\_\_

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

**By signing your name below, you certify that all statements made by you on this application are true and complete to the best of your knowledge and that you have withheld nothing that would affect this application unfavorably. By signing your name below, you acknowledge that you understand that misrepresentations, or omissions may be cause for rejection, or may be cause for subsequent dismissal if you are hired.**

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

**FOR OFFICIAL USE ONLY**

Office Use Only:	_____ U.S. W-4 Form	_____ KY K-4 Form	_____ I-9 Form
CES Form: 1994/lcj	_____ TB Test Results	_____ DCFS Affidavit	_____ CHBI Release

**POSITION(S) APPLIED FOR:** \_\_\_\_\_  
10/2011