



Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

How long have you resided in New Orleans? \_\_\_\_\_

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Previous Work Information

Current/Last Job \_\_\_\_\_ How Long \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_

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

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Current/Last Job \_\_\_\_\_ How Long \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_

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

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Current/Last Job \_\_\_\_\_ How Long \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_

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

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Hourly wage expected \_\_\_\_\_ Can you work on Saturdays Yes \_\_\_\_\_ No \_\_\_\_\_

Can you work overtime Yes \_\_\_\_\_ No \_\_\_\_\_

Education \_\_\_\_\_

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By signing below you are authorizing SLS Arts Inc to contact all listed employers to verify the information listed above. I further certify that this information is true to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

**AUTHORIZATION FOR RELEASE OF INFORMATION**

To the extent permitted by the applicable Federal, State and Local Law, I hereby authorize and permit A & A Screening Solutions, LLC acting on behalf of SLS Arts to obtain, and any person, firm or entity to release to A & A Screening Solutions, LLC or its authorized representatives, the following: 1) my employment record; 2) records concerning any criminal history that I may have; 3) records concerning my driving history; 4) records concerning my credit and rental history. I agree that a copy of this authorization has the same effect as an original. I hereby release and hold harmless any person, firm, or entity that discloses matters in accordance with this authorization and A & A Screening Solutions, LLC and its authorized representatives from liability that might otherwise result from the request for, use of and/or disclosure of all the foregoing information.

**PLEASE PRINT CLEARLY**

Full Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

List any other names that you have worked or attended school under including maiden names:  
\_\_\_\_\_

Social Security #: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_

**Current Address:** \_\_\_\_\_ Length of Residence: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

**Previous Address:** \_\_\_\_\_ Length of Residence: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

**Previous Address:** \_\_\_\_\_ Length of Residence: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

**Previous Address:** \_\_\_\_\_ Length of Residence: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

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