

**PLEASE PRINT, COMPLETE APPLICATION, AND RETURN TO ITC**



*\*Fill in all areas  
\*Please print clearly*

**ICE TRAINING CENTER - RICHARDSON  
EMPLOYMENT APPLICATION**

Applications are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran or in the presence of a non-related medical condition or handicap.

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone 1 \_\_\_\_\_ Phone 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ email: \_\_\_\_\_

DOB \_\_\_\_\_ Are you a citizen of the United States of America?  Yes  No

Position Desired: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Start When \_\_\_\_\_  Full time  Part time  Temporary  Other \_\_\_\_\_

Referred By: \_\_\_\_\_

**EMPLOYMENT EXPERIENCE;** Start with your present job or last job. Include military assignments and other volunteer activities. Exclude organizational names which indicate race, color, religion, sex, or national origin

Employer 1 \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Supervisors' Name \_\_\_\_\_

Job Title \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Salary or Hourly rate \_\_\_\_\_

Employer 2 \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Supervisors' Name \_\_\_\_\_

Job Title \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Salary or Hourly rate \_\_\_\_\_

Employer 3 \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Supervisors' Name \_\_\_\_\_

Job Title \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Salary or Hourly rate \_\_\_\_\_

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ICE TRAINING CENTER - RICHARDSON  
EMPLOYMENT APPLICATION PART 2

**EDUCATION**

Schools/Colleges Attended:

# Years    Year Grad.    Degree

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Describe any special qualifications for this job:

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REFERENCES: Please provide 3 references of persons who are not relatives or former employers, whom you have known at least 3 years.

Name

Phone

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

I CERTIFY that answers given herein are true and complete to the best of my knowledge. I authorize investigation all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract of employment. In the event of employment, I understand that false or misleading information given on my application or interview may result in termination.

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

*For Personnel Department only*

Remarks \_\_\_\_\_

Availability: \_\_\_\_\_

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Interviewed by \_\_\_\_\_ Date \_\_\_\_\_