Application



Authenticity Magazine™ with Dr. Susan R. Carn

A Holistic Life Management™ Magazine

Mailing Address: P. O. Box 832 Mount Pleasant SC 29465

Office Telephone Number: 843.375.9262

Cellular Telephone Number: 843.303.6920

Fax Telephone Number: 843.375.9240

Website: www.AuthenticityMagazine.com

Email: jobs.AuthenticityMagazine@gmail.com



Date: _____

Name:				
Address:				
Phone:	(Home)	(Cellular)		(Alt.)
E-mail:				
Hours Available to Wo	ork:Full TimePart Tir	ne		
Mon	Wed	Fri	Sun	
Tues	Thur	Sat		
Name of Elementary S	Edu School:	cation		
-				
	End Date:		mplete:Y	
Name of High School	School:			
Address of School: _				
Start Date:	End Date:	Did you co	mplete:Y	esNo
Name of College:				
Address of College: _				
Start Date:	End Date:	Did you cor	mplete:Y	esNo



Date:

Previous Work Experience

Name of Company:					
Address of Company:					
Phone # of Company:	Start	Date:	End Date:		
Position Held at Company:					
Job Duties:					
Reason for leaving:					
May we contact your previous e	mployers?YesI	No			
Name of Company:					
Address of Company:					
Phone # of Company:	Start	Date:	End Date:		
Position Held at Company:					
Job Duties:					
Reason for leaving:					
May we contact your previous e	mployers?YesI	No			
<u>References</u>					
Name:	Phone #:		Relationship:		
Name:	Phone #:		Relationship:		



Special Skills

Are there any special skills or train	ning that you	have that pertain to	the position yo	ou are applying	for?
Do you have transportation?	Yes	No			
Do you have internet access?	Yes	No			
	_				
		ncy Contact Perso	<u>n</u>		
Name:		Phone:	(H)		(Alt.)
Address:					
Do you have any specific medical	conditions o	r requirements med	lical needs?	_Yes _	No
If yes, what are they?					
I have read and understood this eaccurate and true. I realize that Authenticity Magazine and/or its the future. All Authenticity Magaknowledge that all materials that its property.	this applica associates re azine positic	tion is not a guarar esponsible for their ons that are underta	ntee for emplo employment d aken by team	yment and do ecisions, now a members are	not hold and/or in with the
Prir	nt Name	Sig	nature	Date	



Place Resume Behind this Page



Office Notes

Notations Performed By:	 	 	Date:	