



Hampton Domestics

**P.O. Box 40
Sag Harbor, N.Y. 11963**

Hampton Domestics will help experienced and qualified applicants obtain a position. If you feel you are *well* qualified, you may complete this job application and mail it to the address below. You must meet our minimum requirements.

We respect your privacy. This information will not be shared with anyone. All of the information requested on this form is provided by you voluntarily. All that we require to contact you is your name and a telephone number. Hampton Domestics is an equal opportunity employer.

You may also fax this form to (631) 458 - 4129.

General Information

Name: _____

Address: _____

City: _____

State / Province: _____ **Postal Code:** _____

Country: _____

Email address: _____

Home Telephone #: _____

Work Telephone #: _____

Other Telephone #: _____

Date of Birth: _____ **Age:** _____

Are you a US Citizen? ___ Yes ___ No

If no, do you have: ___ Green Card ___ Work Authorization Permit

Do you drive? ___ Yes ___ No

Position

Please describe the position for which you are most qualified and experienced.
References will be required.-

Looking For:

Live In Part Time
 Live Out Full Time

Salary Expectations:

\$ _____ Hourly Daily Weekly
 Yearly

Are you willing to relocate? Yes No

If yes, are there any relocation limitations or desires?

Previous Employment Record

Employer 1: _____

Address: _____

City: _____

State / Province: _____ **Postal Code:** _____

Telephone #: _____

Country: _____

Date Started: _____ **Date Left:** _____

Starting Salary: _____ **Ending Salary:** _____

Your Title: _____

Why did you leave this position?

Employer 2: _____
Address: _____

City: _____
State / Province: _____ **Postal Code:** _____
Telephone #: _____
Country: _____
Date Started: _____ **Date Left:** _____
Starting Salary: _____ **Ending Salary:** _____
Your Title: _____
Why did you leave this position?

Employer 3: _____
Address: _____

City: _____
State / Province: _____ **Postal Code:** _____
Telephone #: _____
Country: _____
Date Started: _____ **Date Left:** _____
Starting Salary: _____ **Ending Salary:** _____
Your Title: _____
Why did you leave this position?

Employer 4: _____
Address: _____

City: _____
State / Province: _____ **Postal Code:** _____
Telephone #: _____
Country: _____
Date Started: _____ **Date Left:** _____
Starting Salary: _____ **Ending Salary:** _____
Your Title: _____
Why did you leave this position?

By signing this form, I certify that all facts contained herein are true and complete to the best of my knowledge. I understand that Hampton Domestic acts only as a liaison and assumes no responsibility for any act of employer or employee. I agree not to take any position Hampton Domestic refers me to for which Hampton Domestic is not paid by my new employer or by the agency I am referred to Hampton Domestic by. I agree to keep Hampton Domestic informed regarding my current telephone number and job availability. I agree to notify Hampton Domestic when I accept a position through their efforts and to notify Hampton Domestic if and when I leave that employment.

Applicant's Signature

Date

Mail application to:

Hampton DomesticTM

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P.O.Box 40

Sag Harbor, New York 11963