## www.cuddlebuddy.me

## **Cuddler Application**

## PERSONAL INFORMATION

		DATE:			
CITY:	STATE:	ZIP CODE:			
E-MAIL:		PHONE:			
SOCIAL SECURI	TY NUMBER (SSN)				
EMPLOYMENT ELIGIBILITY					
ARE YOU A U.S. CITIZEN? $\square$ YES $\square$ NO* *IF NO, ARE YOU ALLOWED TO WORK IN THE U.S.? $\square$ YES $\square$ NO HAVE YOU EVER BEEN CONVICTED OF A FELONY? $\square$ YES* $\square$ NO *IF YES, PLEASE EXPLAIN:					
EMPLOYMENT HISTORY					
EMPLOYER #1: _	PHO	E-MAIL  ONE:ADDRESS:	<i>:</i> :		
STATE:	ZIP CODE:	CITY: STARTING PAY: \$ □	—		
HOUR □ SALAR	Y ENDING PAY: \$	DATACHING TATE:			
RI	ESPONSIBILITIES:	STARTING			
DATE:	ENDING DATE:	REASON FOR LEAVING:			
	REF	ERENCES			
REFERENCE #1:	ENCE #1: RELATIONSHIP:				
COMPANY:		TITLE: E-MAIL:			
	PHONE:				

## **MILITARY SERVICE**

<b>ARE YOU A VETERAN?</b> □ YES□ NO BRANCH:		RANK AT
DISCHARGE:	STARTING DATE:	ENDING DATE:
TYPE OF	DISCHARGE:	IF NOT HONORABLE,
PLEASE EXPLAIN:		_
BA	CKGROUND CHECK C	CONSENT
IF ASKED, ARE YOU W	VILLING TO CONSENT TO A BA	CKGROUND CHECK?
$\square$ YES $\square$ NO		
	DISCLAIMER	
Applicant understands that additional paperwork will l	he/she will be an independent contra be required.	actor for Cuddle Buddy, If selected
Signature		Date
PRINT NAME		