## **Employment History Continuation Sheet**

Position Title:									Immediate Supervisor Name:	Full-Time	
Emplo									Title:	Part-Time	
Mailing Address: City & State/ZIP:									Title.	Summer Temp/Project	
Employer's Telephone No.: ( )									Supervisor's Telephone No.:		_
St	arting Da	ate	۱۵	aving D	ate	Current/	Technical		( )	Give average # of hours worked per	
Mo.	Day	Yr.	Mo.	Day	Yr.	Final Salary	Non-managerial		If supervisory, number of employees you	week if part-time:	
						\$	Supervisory/Managerial		supervised:		
Summ	ary of ex	perienc	e inclu	ding spe	cial tra	ining/skills/qua	alifications you have used i	in tl	he performance of this job:		
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