16. WORK EXPERIENCE (continued)

H

Employer/Company Name		Kind of Business	
Street Address		Your Official Job Title	
City and State		Beginning Salary	Ending Salary
Dates of Employment (Mo/Dy/Yr) From / / To / /	Avg. Hrs. Worked Per Week	Reason for Leaving	No. of Employees You Directly Supervised
Name/Title of Your Supervisor		List Job Titles Of Employees You Directly Supervised	
Name/Title of Person Who Can Verify This Employment (If Other Than Supervisor)			

DUTIES: List major duties involved with job and give approximate percentage of time spent on each duty.

% of Time	Major Duties
100%	

I

Employer/Company Name		Kind of Business	
Street Address		Your Official Job Title	
City and State		Beginning Salary	Ending Salary
Dates of Employment (Mo/Dy/Yr) From / / To / /	Avg. Hrs. Worked Per Week	Reason for Leaving	No. of Employees You Directly Supervised
Name/Title of Your Supervisor		List Job Titles Of Employees You Directly Supervised	
Name/Title of Person Who Can Verify This Employment (If Other Than Supervisor)			

DUTIES: List major duties involved with job and give approximate percentage of time spent on each duty.

% of Time	Major Duties
100%	