## **Work History**

Name	SSN (last 4 digits only)			
Please	answer the questions below:			
1.	Have you worked within the last 6 months? (Circle yes or no	o) Ye	es No	
2.	Have you looked for work within the last year? (Circle yes o	r no) Ye	es No	
3.	If not, please list reason(s) you have not been able to work.			
a.				
b.				
c.				
4.	What was your last job?			
5.	When did you leave that job?			
6.	What kind of work are you looking for?			
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Job Se	eker Name (Printed)			
Job Se	eker Signature	 Date		



