NEBRASKA DEPARTMENT OF LABOR OFFICE OF LABOR STANDARDS 550 SOUTH 16TH ST, LINCOLN, NE 68508 402-471-2239

APPLICATION FOR PRIVATE EMPLOYMENT AGENCY LICENSE (CORPORATION)

This application is for use by an individual who will engage in the Private Employment Agency business as a member of a corporation. It must be personally prepared by the applicant. Every applicable question must be answered or the application will be returned for completion.

In compliance with the provisions of the Nebraska Private Employment Agency Statues, Sections 48-501-01 through 48-524, I hereby make application for the license authorizing me to engage in the operation of a Private Employment Agency in the State of Nebraska. In support of this application, I make the following statements under oath:

1.	Name of Applicant:						
		(Last)		(First)	(M.I.)		
2.	Residence Address:						
		(Street Addres	s)		(Telephone Number)		
	(City)	(State)	(Zip)		(County)		
3.	Social Security Num	ber:		Date of Bi	rth:		
	Place of Birth:			Ag	ge:		
4.	Are you a United Stat	es Citizen?		Yes	No		
5.	Name of Corporation:	:					
	Firm or Trade Name under which you will be conducting business:						
6.	Agency Address:						
0.		s)	(City)				
	(State)	(Zip)	(County)		(Telephone Number)		
7.	In what State is the Private Employment Agency Incorporated?						
	Date of Incorporation	n:	(Please atta	ch a copy of th	e articles of incorporation).		
8.	Since applicant is connected with a corporation, please provide the names and addresses of all members having finical interest in the Private Employment Agency business:						

*****NOTE:** All such individuals must complete a separate application form

9. Provide the name of the individual who will be the manager of the Private Employment Agency. If different than the owners provide all the following information:

	Name:	Social Security Number:					
	Date of Birth:	Place of Birth:					
	Residence Address:						
10	Does applicant have a financial interest in any other business? Yes No If so, provide company name(s), addresses and nature of each business:						
11	List below the places where you have been engaged in any kind of business or vocation, stating the name of the employer, the nature of the business and their address, the position you held and the length of time you held such position, accounting for the entire period of the last ten years:						
	Employer:	Telephone Number:					
	Address:						
	Nature of Business:	Contact Person:					
	Position Held: Dates of Employment:						
	Employer:	Telephone Number:					
	Address:						
	Nature of Business:	Contact Person:					
	Position Held:	Dates of Employment:					
	Employer: Telephone Number:						
	Address:						
		Contact Person:					
	Position Held:	Dates of Employment:					
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*** Please attach an additional sheet if necessary

- 12. Have you ever been licensed in this or any other state as an owner, manager or counselor of a Private Employment Agency? If so, where?
- 13. Has your application for a license as an owner, manager or counselor of a Private Employment Agency ever been revoked or suspended in this or any other State? ___Yes___No If so, explain fully, giving the exact dates, places and details of rejection: _____

14. Has your license as an owner, manager or counselor of a Private Employment Agency ever been revoked or suspended in this or any other State? ___Yes___No If so, explain fully, giving the exact dates, places and details of rejection: _____

15. Have you ever been convicted of any criminal offense, or is there any criminal charge now pending against you (other than minor traffic violations)? ____ Yes ____ No If so, explain fully, giving the exact dates, places and details of such revocation or suspension: _____

16. Have you read and do you understand the provisions of the Nebraska Employment Agency Statues? _____ Yes _____ No

Personal References

List below the names and complete address and phone number of at least three (3) other persons, NOT former employers or relatives, who have been acquainted with you for at least two (2) years and are familiar with your character, reputation and abilities.

(Name)	(Address)	(City, State, Zip)	(Telephone Number)	
(Name)	(Address)	(City, State, Zip)	(Telephone Number)	
(Name)	(Address)	(City, State, Zip)	(Telephone Number)	
	(Individual Completing Application) is accurate and true.	hereby ackno	owledge that the above	
	(Signed)		(Date)	
	(Signed Notary Public)		(Date)	
Please attach	1:			
Copy of you Copy of you Sample job o Copy of you	Surety Bond of your Contract Agreement r crrent Fee Schedule r referral form if one is used)	Enclosed:YesEnclosed:YesEnclosed:YesEnclosed:YesEnclosed:YesEnclosed:YesEnclosed:YesEnclosed:YesEnclosed:Yes	No No No No No	
Office Use (Dnly			
Approved by	/:	License Number:		
Date Approv	ved:	Check Number:		
	:	Bond Number:		
		Rejected By:		