



APPLICATION FOR EMPLOYMENT

(PLEASE PRINT CLEARLY IN BLACK INK AND COMPLETE BOTH SIDES)

PRE-EMPLOYMENT QUESTIONNAIRE
EQUAL OPPORTUNITY EMPLOYER

Today's Date : ___/___/___

PERSONAL INFORMATION

| | | | | |
|---------------------------------------|----------------|---------------------|----------|---------|
| NAME (LAST NAME FIRST) | | SOCIAL SECURITY NO. | | |
| PRESENT ADDRESS | CITY | STATE | ZIP CODE | |
| PERMANENT ADDRESS | CITY | STATE | ZIP CODE | |
| PHONE NO. | REFERRED BY | | | |
| IN CASE OF EMERGENCY, NOTIFY | | ADDRESS / PHONE | | |
| DO YOU HAVE A VALID DRIVER'S LICENSE? | IF YES, NUMBER | STATE | CLASS | EXPIRES |

EMPLOYMENT DESIRED

| | | | | |
|-----------------------------|---|-------------------------------------|------|--|
| POSITION | DATE YOU CAN START | SALARY DESIRED | | |
| ARE YOU EMPLOYED? YES OR NO | IF YES, MAY WE CONTACT YOUR PRESENT EMPLOYER? | EVER APPLIED TO THIS COMPANY BEFORE | WHEN | |

BACKGROUND INFORMATION

| | | |
|---|---|-----------------|
| ARE YOU LEGALLY ELIGIBLE TO WORK IN THE US? | HAVE YOU EVER BEEN CONVICTED OF A FELONY? | IF YES, EXPLAIN |
|---|---|-----------------|

EDUCATIONAL BACKGROUND

| NAME AND LOCATION OF SCHOOL | YEARS | DEGREE | MAJOR |
|-----------------------------|-------|--------|-------|
| GRAMMAR SCHOOL | | | |
| HIGH SCHOOL | | | |
| COLLEGE | | | |
| GRAD SCHOOL | | | |
| TRADE SCHOOL | | | |
| OTHER SCHOOL | | | |

SPECIAL TRAINING, SKILLS, EXPERIENCE

| | |
|------------------------------|------|
| IF YES, EXPLAIN | |
| | |
| | |
| US MILITARY OR NAVAL SERVICE | RANK |

REFERENCES

GIVE BELOW THE NAME OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

| | NAME | ADDRESS | BUSINESS | YEARS |
|---|------|---------|----------|-------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

(CONTINUED ON OTHER SIDE)

EMPLOYMENT HISTORY

LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST

| | | | |
|---------------------------------|--------------------------------------|-------------------------|--|
| FROM | TO | TYPE OF BUSINESS | |
| COMPANY | | ADDRESS | |
| PHONE NO. | | POSITION | |
| BASE RATE OF PAY | PER (HOUR, DAY , MONTH , MILE ,ETC.) | ADDITIONAL COMPENSATION | |
| DESCRIPTION OF RESPONSIBILITIES | | REASON FOR LEAVING | |
| SUPERVISOR | | POSITION | |
| FROM | TO | TYPE OF BUSINESS | |
| COMPANY | | ADDRESS | |
| PHONE NO. | | POSITION | |
| BASE RATE OF PAY | PER (HOUR, DAY , MONTH , MILE ,ETC.) | ADDITIONAL COMPENSATION | |
| DESCRIPTION OF RESPONSIBILITIES | | REASON FOR LEAVING | |
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| FROM | TO | TYPE OF BUSINESS | |
| COMPANY | | ADDRESS | |
| PHONE NO. | | POSITION | |
| BASE RATE OF PAY | PER (HOUR, DAY , MONTH , MILE ,ETC.) | ADDITIONAL COMPENSATION | |
| DESCRIPTION OF RESPONSIBILITIES | | REASON FOR LEAVING | |
| SUPERVISOR | | POSITION | |

AUTHORIZATION

" I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED REPRESENTATIVE."

SIGNATURE _____ DATE _____