



Date: \_\_\_\_\_

## APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

### ***Personal Information***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Are you 18 years old or older? \_\_\_\_\_ Telephone: \_\_\_\_\_

### ***Desired Employment***

Position: \_\_\_\_\_ Date you can start: \_\_\_\_\_

Salary desired: \_\_\_\_\_ Have you ever applied with this company before?  Yes  No

Who referred you to this company?

- |  |  |
|--|--|
| <input type="checkbox"/> Employment agency | <input type="checkbox"/> State employment agency |
| <input type="checkbox"/> Newspaper ad      | <input type="checkbox"/> Friend                  |
| <input type="checkbox"/> Walk-in           | <input type="checkbox"/> Other _____             |

### ***Education***

Grammar school: \_\_\_\_\_

High school: \_\_\_\_\_

College: \_\_\_\_\_

Trade or business school: \_\_\_\_\_

Subjects of special study or research work: \_\_\_\_\_

Special training: \_\_\_\_\_

Special skills: \_\_\_\_\_

# APPLICATION FOR EMPLOYMENT (cont.)

AN EQUAL OPPORTUNITY EMPLOYER

## **Former Employers**

(Please list your last three employers, beginning with the most recent one.)

Name of present or last employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Beginning weekly salary: \_\_\_\_\_ Ending weekly salary: \_\_\_\_\_

Name of supervisor: \_\_\_\_\_

Job title: \_\_\_\_\_ Job description: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Name of previous employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Beginning weekly salary: \_\_\_\_\_ Ending weekly salary: \_\_\_\_\_

Name of supervisor: \_\_\_\_\_

Job title: \_\_\_\_\_ Job description: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Name of previous employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Beginning weekly salary: \_\_\_\_\_ Ending weekly salary: \_\_\_\_\_

Name of supervisor: \_\_\_\_\_

Job title: \_\_\_\_\_ Job description: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

# APPLICATION FOR EMPLOYMENT (cont.)

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## References

Please list the names of three persons you are not related to, whom you have known at least one year.

Name	Address	Business	Years known

## Service Record

Branch of service: \_\_\_\_\_

Discharge date and rank: \_\_\_\_\_

Have you been convicted of a felony within the last five (5) years?  Yes  No

If yes, please explain (will not necessarily exclude you from employment consideration):

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## 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. I 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 or the company has any authority to enter in to 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 company representative.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date