

# APPLICATION FOR EMPLOYMENT

## PERSONAL INFORMATION

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

Name: \_\_\_\_\_  
                     Last                                      First                                      Middle                                      Maiden

Current address: \_\_\_\_\_  
                                     Number                                      Street                                      City                                      State                                      Zip

Are you 18 years or older? \_\_\_\_\_

Phone number: (    ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Are you prevented from lawfully becoming employed in the United States because of VISA or immigration status? \_\_\_\_\_

## EMPLOYMENT DESIRED

Position(s) applied for: \_\_\_\_\_ Date you can start work: \_\_\_\_\_

Are you employed now? \_\_\_\_\_ If so, may we inquire of your present employer? \_\_\_\_\_

Have you applied to this company before? \_\_\_\_\_ If so, when? \_\_\_\_\_

Referred by: \_\_\_\_\_

## EDUCATION

TYPE OF SCHOOL	NAME & LOCATION OF SCHOOL	QUALIFICATION OBTAINED	DID YOU GRADUATE?	# OF YEARS ATTENDED
High School				
College				
Trade School				

### Special Skills

### Certifications

### Military Service

Are you in the National Guard or Reserves?

## WORK EXPERIENCE - Please list your work experience for the past five years beginning with your most recent job. Please include periods of self-employment.

From - To (month & year)	Employer Name, Address, & Phone Number	Position	Salary	Reason for Leaving

Have you ever been convicted of a felony?  Yes  No If yes, explain the number of conviction(s), nature of offense(s) leading to conviction(s), when such offense(s) was/were committed, sentence(s) imposed, & type(s) of rehabilitation.

Have you ever been employed with this company?  Yes  No If yes, when?

Do you have any friends or relatives employed by this company?  Yes  No

If yes, please provide their name(s) and relationship(s) to you.

**REFERENCES** - Please list below three people not related to you whom you have known at least one year.

Name	Phone Number	Relationship	# Of Years Acquainted

**APPLICATION FORM WAIVER – PLEASE READ CAREFULLY**

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contact.

Signature \_\_\_\_\_

Date \_\_\_\_\_

\*\*\*\*\* DO NOT WRITE BELOW THIS LINE \*\*\*\*\*0

INTERVIEWED BY: _____	DATE: _____
HIRED: <input type="checkbox"/> Yes <input type="checkbox"/> No POSITION: _____	DEPARTMENT: _____
SALARY / WAGE: _____	DATE REPORTING TO WORK: _____
APPROVED BY: _____	