

"WE ARE AN EQUAL OPPORTUNITY EMPLOYMENT COMPANY. WE ARE DEDICATED TO A POLICY OF NON-DISCRIMINATION IN EMPLOYMENT ON ANY BASIS INCLUDING RACE, CREED, COLOR, AGE, SEX, RELIGION OR NATIONAL ORIGIN, OR PHYSICAL DEFECTS"

## APPLICATION FOR EMPLOYMENT

LAST

FIRST

MIDDLE

### PERSONAL INFORMATION

Date \_\_\_\_\_

NAME \_\_\_\_\_

Last                      First                      Middle

ADDRESS \_\_\_\_\_

Street/PO Box                      City                      State                      Zip

PHONE NUMBER \_\_\_\_\_ REFERRED BY \_\_\_\_\_

### EMPLOYMENT DESIRED

POSITION \_\_\_\_\_ DATE YOU CAN START \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_ IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? \_\_\_\_\_

EVER APPLIED TO OUR COMPANY BEFORE? \_\_\_\_\_ WHEN? \_\_\_\_\_

EDUCATION	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	GRADUATED	SUBJECTS STUDIED
GRAMMAR SCHOOL	_____	_____	_____	_____
HIGH SCHOOL	_____	_____	_____	_____
COLLEGE	_____	_____	_____	_____
TRADE, BUSINESS CORRESPONDENCE SCHOOL	_____	_____	_____	_____

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK \_\_\_\_\_

US MILITARY OR NAVAL SERVICE                      RANK                      PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

ACTIVITIES OTHER THAN RELIGIOUS (CIVIC, ATHLETIC, FRATERNAL, ETC.) \_\_\_\_\_

EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, CREED, COLOR OR NATIONAL ORIGIN OF ITS MEMBERS

**EMPLOYERS** (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE MONTH AND YEAR		NAME AND PHONE # OF EMPLOYER	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

**REFERENCES:** LIST BELOW THE NAMES OF THREE EMPLOYER REFERENCES NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

	NAME	PHONE NUMBER	YEARS ACQUAINTED	RELATIONSHIP
1				
2				
3				

IN CASE OF  
EMERGENCY NOTIFY \_\_\_\_\_

NAME

ADDRESS

PHONE NUMBER

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALRY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_

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