

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION:

DATE: _____

NAME: _____

LAST

FIRST

MIDDLE

PRESENT ADDRESS: _____

STREET

CITY

STATE

ZIP

PERMANENT ADDRESS: _____

STREET

CITY

STATE

ZIP

PHONE NUMBER: () _____ SOC. SEC. #: _____

STATE NAME AND RELATIONSHIP OF ANY RELATIVES IN OUR EMPLOY _____ REFERRED BY: _____

EMPLOYMENT DESIRED:

POSITION: _____ DATE YOU CAN START: _____ SALARY DESIRED: _____

ARE YOU CURRENTLY EMPLOYED? _____ MAY WE CONTACT YOUR EMPLOYER? _____

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? _____ WHERE? _____ WHEN? _____

EDUCATION:

SCHOOL	NAME AND LOCATION	GRADUATED		MAJOR SUBJECTS	GPA
		YES	NO		
GRAMMAR SCHOOL	_____				
HIGH SCHOOL	_____				
COLLEGE	_____				
OTHER (SPECIFY)	_____				

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK: _____

SPECIAL TRAINING: _____

ACTIVITIES: (CIVIC, ATHLETIC, ETC.) _____

(EXCLUDE ORGANIZATIONS THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, CREED, SEX, MARITAL STATUS, AGE, COLOR, OR NATIONAL ORIGIN OF ITS MEMBERS)

(CONTINUED ON OTHER SIDE)

FORMER EMPLOYERS: LIST YOUR LAST FOUR EMPLOYERS, STARTING WITH PRESENT OR MOST RECENT.

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM		\$		
TO		PER		
FROM		\$		
TO		PER		
FROM		\$		
TO		PER		
FROM		\$		
TO		PER		

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

IN CASE OF EMERGENCY, NOTIFY: _____ NAME _____

ADDRESS: _____ PHONE: _____

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 SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

SIGNED: _____ DATE: _____

APPLICANT - DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: _____ DATE: _____

REMARKS: _____

NEATNESS: _____

ABILITY: _____

HIRED: _____ DEPT: _____ POSITION: _____ START DATE: _____ SALARY: _____

APPROVALS:

1. _____ 2. _____ 3. _____
 EMPLOYMENT MANAGER EMPLOYMENT HEAD GENERAL MANAGER