

Employment Application (page2)

LIST THREE ACTIVITIES IN YOUR JOB RESPONSIBILITIES WHICH CONSUME MOST TIME: _____

WHAT WOULD YOU CHANGE ABOUT YOUR CURRENT POSITION IF YOU HAD THE AUTHORITY? _____

WHAT DO YOU LIKE BEST ABOUT THIS POSITION? _____

WHAT DO YOU LIKE LEAST ABOUT THIS POSITION? _____

LIST THE SECOND TO LAST JOB YOU HELD (COMPANY NAME)	START DATE	ENDING DATE	POSITION HELD
ADDRESS	MONTH/DAY/YEAR	MONTH/DAY/YEAR	PROMOTIONS OR AWARDS
TELEPHONE:	HOURLY RATE OR SALARY		MAY WE CONTACT THIS EMPLOYER? YES _____ NO _____
SUPERVISOR:	STARTING	FINAL	

REASON FOR LEAVING THIS POSITION? _____

LIST THREE ACTIVITIES IN YOUR JOB RESPONSIBILITIES WHICH CONSUMED THE MOST TIME: _____

WHAT WOULD YOU CHANGE ABOUT THIS POSITION IF YOU HAD THE AUTHORITY? _____

WHAT DID YOU LIKE BEST ABOUT THIS POSITION? _____

WHAT DID YOU LIKE LEAST ABOUT THIS POSITION? _____

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LIST THE THIRD LAST JOB YOU HELD (COMPANY NAME)	START DATE	ENDING DATE	POSITION HELD
ADDRESS	MONTH/DAY/YEAR	MONTH/DAY/YEAR	PROMOTIONS OR AWARDS
TELEPHONE:	HOURLY RATE OR SALARY		MAY WE CONTACT THIS EMPLOYER?
SUPERVISOR:	STARTING	FINAL	YES ____ NO ____
REASON FOR LEAVING THIS POSITION?			
WHAT DID YOU LIKE BEST ABOUT THIS POSITION?			
WHAT DID YOU LIKE LEAST ABOUT THIS POSITION?			
LIST THE FOURTH LAST JOB YOU HELD (COMPANY NAME)	START DATE	ENDING DATE	POSITION HELD
ADDRESS	MONTH/DAY/YEAR	MONTH/DAY/YEAR	PROMOTIONS OR AWARDS
TELEPHONE:	HOURLY RATE OR SALARY		MAY WE CONTACT THIS EMPLOYER?
SUPERVISOR:	STARTING	FINAL	YES ____ NO ____
REASON FOR LEAVING THIS POSITION?			
WHAT DID YOU LIKE BEST ABOUT THIS POSITION?			
WHAT DID YOU LIKE LEAST ABOUT THIS POSITION?			
WHAT PLANS DO YOU HAVE FOR THE FUTURE?			
WHAT HAVE YOU DONE IN THE PAST TO SEE THAT THESE PLANS WORK OUT?			
WHAT ARE YOU PLANNING TO DO TO SEE THAT THESE PLANS WORK OUT?			

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WHAT DO YOU CONSIDER TO BE YOUR PERSONAL STRENGTHS? _____

WHAT DO YOU CONSIDER TO BE YOUR PERSONAL SHORTCOMINGS? _____

WHAT CRITICISM HAVE YOU RECEIVED FROM YOUR SUPERIORS, PEERS, OR SUBORDINATES IN THE LAST TWO YEARS? _____

WHAT IS YOUR OPINION OF THESE CRITICISMS AND WHAT HAVE YOU DONE ABOUT THEM? _____

WHAT MAGAZINES DO YOU COMMONLY READ?

WHAT BOOKS HAVE YOU RECENTLY READ?

WHAT ARE SOME OF YOUR HOBBIES OR RECREATIONAL INTERESTS?

LIST SOME CIVIC OR COMMUNITY ACTIVITIES YOU HAVE DONE

I certify that answers given here are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment. In the event of employment. I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of this company.

SIGNATURE OF APPLICANT: _____ DATE: _____

Employment Application (page5)References

PERSON 1		
NAME	POSITION	
ADDRESS	TELEPHONE	
CITY	STATE	ZIP CODE
BEST TIME TO CALL		
OTHER COMMENTS		
PERSON 2		
NAME	POSITION	
ADDRESS	TELEPHONE	
CITY	STATE	ZIP CODE
BEST TIME TO CALL		
OTHER COMMENTS		
PERSON 3		
NAME	POSITION	
ADDRESS	TELEPHONE	
CITY	STATE	ZIP CODE
BEST TIME TO CALL		
OTHER COMMENTS		
PERSON 4		
NAME	POSITION	
ADDRESS	TELEPHONE	
CITY	STATE	ZIP CODE
BEST TIME TO CALL		
OTHER COMMENTS		