

### **Employment Application**

APPLICANTS ARE CONSIDERED FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARTIAL OR VETERANS STATUS, OR THE PRESENCE OF A NON-JOB RELATED MEDICAL CONDITION OR HANDICAP. ANY ITEMS ON THIS FORM WHICH YOU FEEL TEND TO VIOLATE FEDERAL OR STATE CIVIL RIGHTS OR F.E.P.C. LEGISLATION NEED NOT BE COMPLETED.

NAME	(LAST)		(FIRST)		(MIDDLE)	DATE FORM COMPLETED	
PRESENT ADDRESS (S	ESENT ADDRESS (STREET, CITY, STATE, ZIP CODE)				TELEPHONE NUMBERS	HOME:	
						WORK:	
					SOCIAL SECURITY NU		
POSITION APPLIED FO	R:		IF YOU ARE UND	ER AGE 18, CAN YO	L U FURNISH A WOF	RK PERMIT? YES_	NO
DO YOU HAVE ANY M	EDICAL CONDITIONS W	HICH COULD BE AGGR	AVATED BY PERFORM	MING YOUR DUTIES? IF	YES, PLEASE EXPLAIN.		
ARE YOU PREVENT	ED FROM LAWFULLY	BECOMING EMPLO	YED IN THIS COUN	TRY BECAUSE OF VIS	A OR IMMIGRATION	STATUS? YES	NO
ARE YOU AVAILA	BLE TO WORK : FU	ULL TIME 40 HRS/V	VEEK PART	TIME LESS THAN 4	0 HRS/WEEK	TEMPORARY	_
WHAT DATE WOULD Y	YOU BE AVAILABLE TO	WORK?		ARE YOU ON LAY OFF	SUBJECT TO RECALL?		
HAVE YOU EVER BEEN	N CONVICTED OF A FEL	ONY WITHIN THE LAST	SEVEN YEARS? IF YE	S, PLEASE EXPLAIN.			
EDUCATION	ELEMENTARY	HIGH SCHOOL	COLLEGE / UNIVERSITY		GRADUATE / PROFESSIONAL		CERTIFICATE PROGRAMS
SCHOOL NAME							
YEARS COMPLETED	4 5 6 7 8	9 10 11 12	1 2 3 4 5 6		1 2 3 4 5		
DIPLOMA / DEGREE							
COURSE STUDY							
DESCRIBE ANY SPECIA	ALIZED TRAINING, APPI	RENTICESHIP, INTERNS	HIP, OR EXTRA CURRI	CULAR ACTIVITIES WHI	LE AT SCHOOL.		
DO YOU HAVE A I	DRIVER'S LICENSE	YES NO	ISSUING	STATE		#	
DO YOU HAVE A (	COMMERCIAL DRIV	VER'S LICENSE? Y	ES NO	_ CLASS A CI			
LIST THE LAST JOB YOU HELD (COMPANY NAME)			START DATE	ENDING DATE	POSITION HELD		
ADDRESS			MONTH/DAY/YEAR	MONTH/DAY/YEAR	PROMOTIONS OR AWARDS		
TELEPHONE:			HOURLY RA	TE OR SALARY	MAY WE CONTACT THIS EMPLOYER?		
SUPERVISOR:				STARTING	FINAL	YES	NO
REASON FOR LEAVING	G OR WANTING TO LEA'	VE THIS POSITION?			I	I	

## Employment Application (page2)

LIST THREE ACTIVITIES IN YOUR JOB RESPONSIBILITIES WHICH CONSUME MOST TIME:					
WHAT WOULD YOU CHANGE ABOUT YOUR CURRENT POSITION IF YOU HA	AD THE AUTHORIT	Y?			
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			PROMOTIONS OR AWA	ARDS	
TELEPHONE:	MONTH/DAY/YEAR HOURLY RAT	TE OR SALARY	MAY WE CONTACT TH	HS EMPLOYER?	
SUPER VISOR:	STARTING	FINAL	YES	NO	
REASON FOR LEAVING THIS POSITION?					
LIST THREE ACTIVITIES IN YOUR JOB RESPONSIBILITIES WHICH CONSUM	ED THE MOST TIM	E:			
WHAT WOULD YOU CHANGE ABOUT THIS POSITION IF YOU HAD THE AUT	THORITY?				
WHAT DID YOU LIKE BEST ABOUT THIS POSITION?					
WHAT DID YOU LIKE LEAST ABOUT THIS POSITION?					

## Employment Application (page3)

LIST THE THIRD LAST JOB YOU HELD (COMPANY NAME)	START DATE	ENDING DATE	POSITION HELD		
ADDRESS			PROMOTIONS OR AWARDS		
TELEPHONE:	MONTH/DAY/YEAR	MONTH/DAY/YEAR			
	HOUKLIKA	IE OK SALAK I	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 I AST IOR VOLUEED. (COMDANY MAME)	START DATE	ENDING DATE	POSITION HELD		
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:		TE OR SALARY	MAY WE CONTACT THIS EMPLOYER?		
SUPERVISOR:			VES NO		
	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 bid 100 like least about this rostition?					
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?					

## Employment Application (page4)

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.

# Employment Application (page5)References

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