



Personal Information

| | | | |
|--------------------|-----------------------|-----------------------------|----------|
| NAME (LAST, FIRST) | | SOCIAL SECURITY # --- -- | |
| PRESENT ADDRESS | CITY | STATE | ZIP CODE |
| PERMANENT ADDRESS | CITY | STATE | ZIP CODE |
| TELEPHONE # | SECONDARY TELEPHONE # | REFERRED BY | |

Employment Desired

| | | |
|---|--|----------------|
| POSITION | DATE YOU CAN START | SALARY DESIRED |
| ARE YOU EMPLOYED NOW? ___ YES ___ NO | IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? ___ YES ___ NO | |
| EVER APPLIED TO THIS COMPANY BEFORE? ___ YES ___ NO | WHEN | |

Education History

| | NAME & LOCATION OF SCHOOL | YEARS ATTENDED | DID YOU GRADUATE | SUBJECTS STUDIED |
|--|---------------------------|----------------|------------------|------------------|
| HIGH SCHOOL | | | | |
| COLLEGE | | | | |
| TRAD, BUSINESS, OR CORRESPONDENCE SCHOOL | | | | |

General Information

| | |
|--|------|
| SUBJECT OF SPECIAL STUDY/RESEARCH WORK | |
| SPECIAL TRAINING | |
| SPECIAL SKILLS | |
| U.S. MILITARY OR NAVAL SERVICE | RANK |

Former Employers (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE-FIRST)

| DATE MONTH AND YEAR | NAME & ADDRESS OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|---------------------|----------------------------|--------|----------|--------------------|
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |

References (GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.)

| NAME | TELEPHONE # | PROFESSION | YEARS KNOWN |
|------|-------------|------------|-------------|
| | | | |
| | | | |
| | | | |

Authorization

"I verify that the facts contained in this application are true and complete to the vest of my knowledge and understand that, if employed, falsified statements on this application shall be ground for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with a written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment."

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

DATE

SIGNATURE

Office Use Only

Remarks/Notes Regarding Application:

Neatness: _____ Character: _____

Personality: _____ Ability: _____

Hired: _____ Start Date: _____ Salary Wages: _____

Dept: _____ Position: _____ Will Report: _____

Employment Manager

Department Head

General Manager