



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE _____

NAME: _____ SOCIAL SECURITY NUMBER: _____

ADDRESS: _____
Street City State Zip

PHONE NUMBER: _____ Are you 18 years or older? YES NO

ARE YOU A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE U.S.? YES NO

DESIRED EMPLOYMENT

FULL TIME: Yes No PART TIME: Yes No SEASONAL: Yes No INTERNSHIP: Yes No

POSITION APPLIED FOR: _____

DATE AVAILABLE FOR WORK: _____ SALARY DESIRED _____

ARE YOU EMPLOYED NOW? YES NO MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

HAVE YOU EVER APPLIED WITH US BEFORE? YES NO WHEN? _____

REFERRED BY: _____

EDUCATION

	NAME AND LOCATION OF SCHOOL	# YRS ATTENDED	GRADUATE?	DEGREE
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE				

SPECIAL SKILL:

ACTIVITIES: (Exclude organizations, the name of which indicates race, creed, sex, age martial status, color, or nation of orgin, or disability of its members.)

FORMER EMPLOYERS:

U.S. MILITARY OR NAVAL SERVICE, RANK: _____

LIST THE THREE MOST CURRENT EMPLOYERS:

MONTH & YEAR	NAME & ADDRESS	SALARY	POSITION	REASON FOR LEAVING?

DO WE HAVE YOUR PERMISSION TO CONTACT PREVIOUS EMPLOYERS? YES NO

REFERENCES:

LIST THREE:

	NAME	ADDRESS	PHONE
1			
2			
3			

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. WE DO NOT DISCRIMATE ON THE BASIS OF RACE, RELIGION, COLOR, SEX, AGE, NATIONAL ORIGIN, OR DISABILITY.

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE TYPE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE AND WITHOUT CAUSE.

SIGNATURE: _____ DATE: _____