

## Application for Employment

### Personal Information

Date: \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
                     Last                      First                      Middle

Present Address: \_\_\_\_\_  
                                     Street                      City                      State                      Zip

Permanent Address: \_\_\_\_\_  
                                     Street                      City                      State                      Zip

Phone No: \_\_\_\_\_ Are you 18 years or older?  Yes  No

Are you prevented from lawfully becoming employed in this country because of visa or immigration status?  Yes  No

### Employment Desired

Position: \_\_\_\_\_  F/T  P/T Date you can start: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Are you employed now:  Yes  No If so can we inquire of your current employer:  Yes  No

Applied to this company before:  Yes  No When: \_\_\_\_\_

Referred by: \_\_\_\_\_

Education	Name of School	Years Attended	Did You Graduate	Subjects Studied
High School				
College/Trade School				
College/Trade School				
Other Training or Continuing Educ.				

**General** Subjects of special study or research work: \_\_\_\_\_

Special Skills: \_\_\_\_\_

Activities: (Civic, Athletic, Etc.): \_\_\_\_\_

Exclude organizations whose name indicates race, creed, sex, age, marital status, color, or nation of origin of its members

**U.S. Military Service**  Yes  No Branch/Rank: \_\_\_\_\_ Presently in Guard or Reserves:  Yes  No

**Employment** List your last three (3) employers, or all employers for the last ten (10) years, starting with most recent. Explain any gaps in employment. Use a separate sheet of paper if necessary.

Date Month & Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				
From				
To				

Which of these jobs did you like best? \_\_\_\_\_

Which of these jobs did you like least? \_\_\_\_\_

**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 No

I certify that all the information submitted by me on this application is true and complete and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice at any time, at either my or the company's option. I also understand and agree that the company may change with or without cause, and with or without notice the terms and conditions of my employment at any time.

I understand no representative other than the director, and then only in writing and signed by the director, has any authority to enter into any agreement for employment for any specific period of time, or make any agreement contrary to the foregoing.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Do not write below this line**

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_

Neatness: \_\_\_\_\_ Ability: \_\_\_\_\_

Hired:  Yes  No Position: \_\_\_\_\_ Dept: \_\_\_\_\_

Salary / Wage: \_\_\_\_\_ Reporting Date: \_\_\_\_\_

Approved: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
 Employment Manager Department Head General Manger