

APPLICATION FOR EMPLOYMENT

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PERSONAL INFORMATION:

NAME (LAST, FIRST, MIDDLE):		DATE:
PRESENT ADDRESS (STREET, CITY, STATE, ZIP):		
PERMANENT ADDRESS (STREET, CITY, STATE, ZIP):		
PHONE NUMBER:	SOC. SEC. #	
STATE NAME & RELATIONSHIP OF ANY RELATIVES IN OUR EMPLOY:	REFERRED BY:	

EMPLOYMENT DESIRED:

POSITION:	
DATE YOU CAN START:	SALARY DESIRED:
ARE YOU EMPLOYED NOW?	MAY WE CONTACT YOUR EMPLOYER?
HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE?	WHEN?
WHERE?	

EDUCATION:

SCHOOL	NAME & LOCATION	GRADUATED		MAJOR SUBJECTS	GPA
		YES	NO		
GRAMMAR SCHOOL					
HIGH SCHOOL					
COLLEGE/ UNIVERSITY					
OTHER (SPECIFY)					

OTHER INFORMATION:

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK:
SPECIAL TRAINING:
ACTIVITIES:

EXCLUDE ORGANIZATIONS; THE NAME OR CHARACTER OF WHICH INDICATES RACE, CREED, SEX, MARITAL STATUS, AGE, COLOR, OR NATIONAL ORIGIN OF ITS MEMBERS.

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FORMER EMPLOYERS: LIST THE LAST FOUR EMPLOYERS, STARTING WITH PRESENT OR MOST RECENT.

DATE MONTH & YEAR	NAME & BUSINESS ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM:		\$		
TO:		PER:		
FROM:		\$		
TO:		PER:		
FROM:		\$		
TO:		PER:		
FROM:		\$		
TO:		PER:		

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

IN CASE OF EMERGENCY, NOTIFY: _____

ADDRESS: _____ **PHONE:** _____

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, AT THE DISCRETION OF THE EMPLOYER, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

SIGNED: _____ **DATE:** _____

APPLICANT - DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY:	DATE:	
REMARKS:		
NEATNESS:		
ABILITY:		
HIRED:	DEPT: POSITION:	
START DATE:	SALARY:	
APPROVALS:		
_____	_____	_____
1. EMPLOYMENT MANAGER	2. EMPLOYMENT HEAD	3. GENERAL MANAGER