



Application For Employment

Name _____ Date _____
Last First MI

Current Address _____
Street City State Zip

Previous Address _____
Street City State Zip

Phone _____
Home Cell

Social Security # _____ DOB _____

Position applying for _____ Salary requirement _____

Full time Part time _____ Hrs/wk

Date available to start _____

Referral source Advertisement _____ Friend _____

Employment agency _____ Other _____

Have you ever filled out an application here before? Yes No Date _____

Have you ever been employed here before? Yes No Dates _____

What geographical location do you prefer to work in? _____

Do you have any objection to working Saturdays? Yes No

Do you have any objection to working Sundays? Yes No

Do you have any objection to working overtime? Yes No

Do you have any relatives employed by the company or its affiliates? Yes No

If yes, please give name, location and relationship _____

Are you legally eligible to work in the U.S.? Yes No

Are you a U.S. citizen? Yes No

Are you a veteran of the U.S. Military Service? Yes No

If so, what was your branch? _____

Education

	Name & Address	Dates	Degree
High School			
College			
Graduate/Professional			
Extracurricular Activities			

 Please list employment record over the last 10 years starting with your present or last employer. If space is insufficient, list on separate page. May we contact your present employer for a reference? Yes No

Employer	Work Performed	Salary	
Address		Starting	Final
Job Title		Dates (Month/Year)	
Supervisor & Phone Number		To	From
Reason For Leaving			
Employer	Work Performed	Salary	
Address		Starting	Final
Job Title		Dates (Month/Year)	
Supervisor & Phone Number		To	From
Reason For Leaving			
Employer	Work Performed	Salary	
Address		Starting	Final
Job Title		Dates (Month/Year)	
Supervisor & Phone Number		To	From
Reason For Leaving			
Employer	Work Performed	Salary	
Address		Starting	Final
Job Title		Dates (Month/Year)	
Supervisor & Phone Number		To	From
Reason For Leaving			

Unemployment history

Please account for all periods of unemployment of 1 month or longer over the past ten years. Please include volunteer work, temporary work, or special skills utilized during this time.

From		To		State what you were doing
mo.	yr.	mo.	yr.	
mo.	yr.	mo.	yr.	
mo.	yr.	mo.	yr.	
mo.	yr.	mo.	yr.	

Office skills

Please indicate by marking the appropriate boxes which office skills you maintain:

Typing/wpm_____ Dictaphone Word Processor _____
model

10 key Short hand/wpm_____ Teller Terminal_____
 touch sight model

CAT PC_____ Software_____
model

Other skills _____

Foreign Languages _____



References:

Name	Address	Phone number	Years acquainted
1.			
2.			
3.			



For the purpose of checking your references, please indicate other names (ex. a.k.a., maiden, and nickname) under which you worked or attended school. _____

Have you ever been convicted of a criminal offense other than a minor traffic violation? _____
If so, please explain. _____

List professional, trade, business or civic activities and offices held. (Exclude groups, which indicate race, color, religion, sex or national origin) _____

Personal

Tell us briefly about yourself, your ambitions, particular qualifications for this position, and your reasons for seeking employment with our company.



.....
I hereby affirm that my answers to the foregoing questions are true and correct, and that I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably. I understand that any false information submitted in this application may result in my discharge; and that my employment will be subject to proof of age, proof of legal right to remain permanently in this country, and verification of identity and employment eligibility. A further condition of my employment and continued employment will be my assent to a background questionnaire or other examinations, and verification by physician as to my physical and mental condition.

In consideration of my employment, I agree to conform to the rules and regulations of this company and further agree that my employment and compensation can be terminated, with or without notice, at any time, and without cause at the option of the employer or myself.

Applicant Signature & Date

DO NOT WRITE BELOW THIS LINE
.....

Interviewed by: _____ Date _____

Remarks: _____

Job offer accepted declined Date _____

TO THE SUPERVISOR: If you are interested in employing this individual, please complete the following sections below and forward to your Department Manager for signature. To ensure proper and timely processing, please forward this application immediately upon completion to the Human Resources Department.

Branch _____ Position _____ 1st Day _____

Job Grade _____

If P/T, work hours per week _____ Replacement for _____

Department Manager _____ Employment by _____

Reports to _____ Interviewed _____ Pay Rate _____