



# Personal Information

(PLEASE PRINT)

Date of Application \_\_\_\_\_ Position(s) Applied For \_\_\_\_\_

Salary Expectation \_\_\_\_\_ On what date would you be available for work? \_\_\_\_\_

Are you available to work  Full-time  Part-time  Weekends  Temporary

Times available for work (please indicate whether "a.m.," "p.m.," or "any")

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

How were you referred to us? \_\_\_\_\_

Have you filed an application here before?  Yes  No If yes, date/location \_\_\_\_\_

Have you ever been employed here before?  Yes  No If yes, date/location \_\_\_\_\_

Are you employed now?  Yes  No May we contact your present employer?  Yes  No

Does your present employer know of your plans to change employment?  Yes  No

Why do you desire to make a change? \_\_\_\_\_

Are you on a lay off and subject to recall?  Yes  No

Have you ever been discharged or requested to resign from a position?  Yes  No If yes, explain. \_\_\_\_\_

How much time have you lost from work during the last 12 months? \_\_\_\_\_

Do you have steady transportation to work?  Yes  No Can you travel if a job requires it?  Yes  No

Have you ever held a position of trust (handling money or confidential material)?  Yes  No

Have you ever been refused Bond? \_\_\_\_\_ If Yes, please explain \_\_\_\_\_

Are you legally eligible to work in the United States?  Yes  No  
*(Proof of citizenship/immigration status & identity is required upon employment.)*

Have you ever been convicted of or received a sentence for a crime(s) other than a minor traffic violation?  
*(Answering "yes" is not an automatic bar to employment)*

Yes  No If so, state date, court and place where offense(s) occurred \_\_\_\_\_

Do you hold a valid driver's license?  Yes  No List State \_\_\_\_\_

Have you been convicted of any moving violation(s) in the last 3 years? \_\_\_\_\_ If Yes, give date(s) and explanation.

List three things that are important to you in a work environment 1) \_\_\_\_\_

2) \_\_\_\_\_ 3) \_\_\_\_\_

List three characteristics that best describe you 1) \_\_\_\_\_

2) \_\_\_\_\_ 3) \_\_\_\_\_

Why do you want to work here? \_\_\_\_\_

# Full Employment History (Must be completed even when accompanied by resume)

Start with your present or last job. Include ALL assignments and positions held. Be specific about information and dates.

**A COMPLETE WORK HISTORY MUST BE PROVIDED. ALL EMPLOYMENT "GAPS" MUST BE LISTED.**

Employer	Dates Employed		Summary of Work Performed & Job Responsibilities
	From (Mo/Yr)	To (Mo/Yr)	
Address (Street, City and State)	Phone:		
Job Title	Hourly Rate/Salary		
	Starting	Final	
Supervisor			
Resigned <input type="checkbox"/> Terminated <input type="checkbox"/> State Reason:			
Employer	Dates Employed		Summary of Work Performed & Job Responsibilities
	From (Mo/Yr)	To (Mo/Yr)	
Address (Street, City and State)	Phone:		
Job Title	Hourly Rate/Salary		
	Starting	Final	
Supervisor			
Resigned <input type="checkbox"/> Terminated <input type="checkbox"/> State Reason:			
Employer	Dates Employed		Summary of Work Performed & Job Responsibilities
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Address (Street, City and State)	Phone:		
Job Title	Hourly Rate/Salary		
	Starting	Final	
Supervisor			
Resigned <input type="checkbox"/> Terminated <input type="checkbox"/> State Reason:			
Employer	Dates Employed		Summary of Work Performed & Job Responsibilities
	From (Mo/Yr)	To (Mo/Yr)	
Address (Street, City and State)	Phone:		
Job Title	Hourly Rate/Salary		
	Starting	Final	
Supervisor			
Resigned <input type="checkbox"/> Terminated <input type="checkbox"/> State Reason:			

If you need additional space to provide a full work history, you must request a separate sheet(s) of paper.

# Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience \_\_\_\_\_

List professional, trade, business or civic activities and offices held \_\_\_\_\_

Computer skills (list programs and proficiency level) \_\_\_\_\_

Typing \_\_\_\_\_ WPM      Shorthand \_\_\_\_\_ WPM

What foreign languages do you speak, read and/or write? \_\_\_\_\_

## Education Information

SCHOOLING	YEARS COMPLETED	DEGREE REC. & MAJOR SUB.	NAME OF SCHOOL	LOCATION	DID YOU GRADUATE?
GRAMMAR OR HIGH SCHOOL					
TRADE BUS. OR CORRESPONDENCE					
COLLEGE					
GRADUATE SCHOOL					

Honors Received: \_\_\_\_\_

## Military Service

Branch of Service and Serial Number	Present Selective Service Classification	Rank at Discharge
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List Duties/Special Training \_\_\_\_\_

## Agreement

The facts set forth above in my application for employment are true and complete. I understand that false statements or omission of information on this application or any other employment form may lead to dismissal or denial of employment. You are hereby authorized to make any investigation of my personal history, financial, criminal, credit and motor vehicle records through any investigative or credit agencies or bureaus of your choice. You are also authorized to administer personality profile tests and verify my background. A criminal record or sentence is not an automatic disqualification for employment. I agree to submit to any drug or alcohol testing prior to or after employment and I agree to submit to a medical evaluation, if required.

In making this application for employment, I also understand that an investigative consumer report may be made whereby information is obtained through personal interviews with my neighbors, friends or others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigative consumer report. In exchange for the consideration of my employment application by this company, I hereby release and forever discharge the company (including its directors, officers, employees and agents) and my past and/or present employers (their directors, officers, employees and agents) from any liabilities which may result from an investigation of my past and/or present employment or from the disclosure of such information. I authorize the use of any information in this application to verify my statements, and I authorize the past employers, doctors, all references and any other persons to answer all questions asked concerning my ability, character, reputation and previous employment record.

I understand that if my application is accepted that employment with this company at all times is employment "at will." It is further understood that this "at will" relationship may not be changed by any written document, verbal statements, or by conduct unless such change is specifically acknowledged by an authorized executive of the company. I further understand that my "at will" employment may be terminated at any time by myself or the company and includes no guarantee, contract or promise of employment for any specific length of time. I understand that the first ninety (90) days of employment is a new hire introductory period.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

In case of emergency, I authorize you to notify: \_\_\_\_\_

Work Phone (      )	Home Phone (      )
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