

EMPLOYMENT APPLICATION

DATE: _____

PRE-EMPLOYMENT QUESTIONNAIRE EQUAL OPPORTUNITY EMPLOYER	Salary Desired: _____ Position applied for: _____ Referred by: _____
--	--

Name: _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
Phone: _____ **Email:** _____

Type of employment desired: <input type="checkbox"/> Full <input type="checkbox"/> Part <input type="checkbox"/> Seasonal _____ Start Date: _____ Summarize your Skills or Qualifications (Licenses, Training, Clubs, Volunteer) _____ _____ _____

PREVIOUS EMPLOYMENT (begin with most recent)

Position: _____ **Dates: From** ___/___/___ **to** ___/___/___
Employer: _____ **Start Salary:** _____ **End Salary:** _____
Address: _____
Phone: _____ **Supervisor:** _____ **Title:** _____
Responsibilities: _____

Reason for Leaving: _____
May we contact this employer for a reference? YES ___ NO___ explanation: _____

Position: _____ **Dates: From** ___/___/___ **To** ___/___/___
Employer: _____ **Start Salary:** _____ **End Salary:** _____
Address: _____
Phone: _____ **Supervisor:** _____ **Title:** _____
Responsibilities: _____

Reason for Leaving: _____
May we contact this employer for a reference? YES ___ NO___ explanation: _____

Position: _____ **Dates: From** ___/___/___ **To** ___/___/___
Employer: _____ **Start Salary:** _____ **End Salary:** _____
Address: _____
Phone: _____ **Supervisor:** _____ **Title:** _____
Responsibilities: _____

Reason for Leaving: _____
May we contact this employer for a reference? YES ___ NO___ explanation: _____

REFERENCES PHONE/CITY BUSINESS YRS KNOWN

NAME,CITY,STATE OF SCHOOL DEGREE /DIPLOMA SUBJECT YEAR GRAD.

Are you eligible to work in the United States? __yes __no
If you are under 18 years of age, can you provide a work permit? __yes __no
Have you been convicted of a felony within the last five years? __yes __no

"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 authorize investigation of all statements contained herein and the references and Employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Signature: _____ Date: _____

Interviewed by: _____ Date: _____

-----**DO NOT WRITE BELOW THIS LINE**-----

SUNDAY _____
SATURDAY _____
FRIDAY _____
THURSDAY _____
WEDNESDAY _____
TUESDAY _____
MONDAY _____
NOTES: _____

WINE: _____
MARTINI _____
MAIN _____
BW _____

Ref 1 _____
Ref 2 _____
Ref 3 _____

CONTACT IN EMERGENCY: _____

SOCIAL SECURITY: _____ BIRTHDAY: _____

HIRED FOR: _____ RATE: _____

TERMINATED: _____

