



Application for Employment

DATE: _____

ABOUT YOU

Name _____ Nickname _____

Social Security # _____ - _____ - _____ Home Phone _____ Message Phone _____

Street Address _____ City _____ State _____ Zip _____

Mailing Address _____ City _____ State _____ Zip _____

If you listed a message phone above, how often do you check for messages? _____

Do you have reliable transportation to meet any scheduled shift? _____

Can you read at 6th grade level? _____ Have you been convicted of a felony? _____ If yes, give details on last page

Have you ever worked for us before? _____ If so, under what name? _____

Do you have any friends or relatives working for us? _____ If so, who? _____

Can you provide proof that you are over 18 years old? _____ over 21 years old? _____ Are you a smoker? _____

Do you have a valid drivers license? _____ Class _____ State _____ License # _____

Have you had any accidents or moving violations in the past three years? _____ If yes, please provide details on last page

Have you ever been bonded? _____ Is there any reason why you could not be bonded? _____ If yes, describe on last page

Do you have a legal right to work in the U.S.? _____ Can you provide documentation of your legal right to work? _____

Is there any reason why you could not perform all physical aspects of this job (including the ability to lift 50 lbs.)? _____
If yes, please provide details on the last page.

Is additional information concerning change of name necessary to check work or education records? _____ If yes, explain.
(continue on last page if necessary)

Describe your use of drugs or alcohol: (continue on last page if necessary)

ABOUT THE JOB

For what position are you applying? _____ Salary Requirements: \$ _____ per _____

Would you accept another position? _____ If so which one? _____

Which do you prefer? Full time work part time work. If part time, about how many hours per week? _____

Which will you accept? Full time work part time work

When could you start working for us full time? _____ When are you NOT available to work for us full time?

MON	TUE	WED	THU	FRI	SAT	SUN
morning	morning	morning	morning	morning	morning	morning
afternoon	afternoon	afternoon	afternoon	afternoon	afternoon	afternoon
evening	evening	evening	evening	evening	evening	evening

When could you start working for us part time? _____ When are you NOT available to work for us part time?

MON	TUE	WED	THU	FRI	SAT	SUN
morning	morning	morning	morning	morning	morning	morning
afternoon	afternoon	afternoon	afternoon	afternoon	afternoon	afternoon
evening	evening	evening	evening	evening	evening	evening

ABOUT YOUR WORK EXPERIENCE

(Please start with your most recent position) Resume Attached? YES NO

COMPANY _____ Mo/Yr Hired _____ Mo/Yr Left _____

Job Title _____ Reason for Leaving _____

No. Supervised: Starting _____ Ending _____ Starting Salary: \$ _____ per _____ Final Salary \$ _____ per _____

Supervisor's Name _____ Position _____ Phone _____

Supervisor's Name _____ Position _____ Phone _____

Co-worker's Name _____ Position _____ Phone _____

Co-worker's Name _____ Position _____ Phone _____

Subordinate's Name _____ Position _____ Phone _____

Subordinate's Name _____ Position _____ Phone _____

Major Responsibilities and Accomplishments:

MORE ABOUT YOUR WORK EXPERIENCE

COMPANY _____ Mo/Yr Hired _____ Mo/Yr Left _____

Job Title _____ Reason for Leaving _____

No. Supervised: Starting _____ Ending _____ Starting Salary:\$ _____ per _____ Final Salary\$ _____ per _____

Supervisor's Name _____ Postion _____ Phone _____

Supervisor's Name _____ Postion _____ Phone _____

Co-worker's Name _____ Postion _____ Phone _____

Co-worker's Name _____ Postion _____ Phone _____

Subordinate's Name _____ Postion _____ Phone _____

Subordinate's Name _____ Postion _____ Phone _____

Major Responsibilities and Accomplishments:

COMPANY _____ Mo/Yr Hired _____ Mo/Yr Left _____

Job Title _____ Reason for Leaving _____

No. Supervised: Starting _____ Ending _____ Starting Salary:\$ _____ per _____ Final Salary\$ _____ per _____

Supervisor's Name _____ Postion _____ Phone _____

Supervisor's Name _____ Postion _____ Phone _____

Co-worker's Name _____ Postion _____ Phone _____

Co-worker's Name _____ Postion _____ Phone _____

Subordinate's Name _____ Postion _____ Phone _____

Subordinate's Name _____ Postion _____ Phone _____

Major Responsibilities and Accomplishments:

ABOUT YOUR EDUCATION

HIGH SCHOOL _____ City _____ State _____ Graduated? _____

No. Years Completed _____ Major _____ Verification Phone(____) _____

COLLEGE _____ City _____ State _____ Degree _____

No. Years Completed _____ Major _____ Verification Phone(____) _____

GRAD SCHOOL _____ City _____ State _____ Degree _____

No. Years Completed _____ Major _____ Verification Phone(____) _____

Extracurricular activities:

Other training programs completed:

Professional memberships and certifications:

OTHER COMMENTS

Why would you be a good choice for this position?

I certify the information above is complete and accurate to the best of my knowledge. I authorize the individuals, companies and agencies concerned to provide this company and its agents with all information necessary to verify the statements I have made in this application and I release them from any liability for doing so. I understand I must receive satisfactory references from previous employers, co-workers and subordinates (if any) before an offer of employment can be made. I understand that incomplete or unsigned application will not be considered and that false, incomplete or misleading statements are grounds for my immediate discharge. I understand that any offer of employment is contingent upon my passing a prescribed physical examination, proving my identity and documenting my right to work. I understand these policies cannot be changed except in wri

Signature _____ Print Name _____ Date _____