



# Employment Application

## APPLICANT INFORMATION

|   |  |                              |                             |  |                             |
|---|--|------------------------------|-----------------------------|--|-----------------------------|
| Last Name                                 |  | First                        |                             | M.I.   | Date                        |
| Street Address                            |  |                              |                             | Apartment/Unit #                               |                             |
| City                                      |  | State                        |                             | ZIP  |                             |
| Phone                                     |  | E-mail Address               |                             |  |                             |
| Date Available                            |  | Desired Salary               |                             |  |                             |
| Position Applied for                      |  |                              |                             |  |                             |
| Are you a citizen of the United States?   |  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If no, are you authorized to work in the U.S.? |                             |
|   |  |                              |                             | YES <input type="checkbox"/>                   | NO <input type="checkbox"/> |
| Have you ever worked for this company?    |  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If so, when?                                   |                             |
| Have you ever been convicted of a felony? |  | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, explain                                |                             |

## EDUCATION

|             |    |                   |   |
|-------------|----|-------------------|---|
| High School |    | Address           |   |
| From        | To | Did you graduate? | YES <input type="checkbox"/> NO <input type="checkbox"/> Degree |
| College     |    | Address           |   |
| From        | To | Did you graduate? | YES <input type="checkbox"/> NO <input type="checkbox"/> Degree |
| Other       |    | Address           |   |
| From        | To | Did you graduate? | YES <input type="checkbox"/> NO <input type="checkbox"/> Degree |

## REFERENCES

*Please list three professional references.*

|           |              |
|-----------|--------------|
| Full Name | Relationship |
| Company   | Phone        |
| Address   |              |
| Full Name | Relationship |
| Company   | Phone        |
| Address   |              |
| Full Name | Relationship |
| Company   | Phone        |
| Address   |              |

| PREVIOUS EMPLOYMENT   |                 |                    |                  |
|---|-----------------|--------------------|------------------|
| Company   |                 | Phone              |                  |
| Address   |                 | Supervisor         |                  |
| Job Title   | Starting Salary | \$                 | Ending Salary \$ |
| Responsibilities  |                 |                    |                  |
| From  | To              | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                 |                    |                  |
| Company   |                 | Phone              |                  |
| Address   |                 | Supervisor         |                  |
| Job Title   | Starting Salary | \$                 | Ending Salary \$ |
| Responsibilities  |                 |                    |                  |
| From  | To              | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                 |                    |                  |
| Company   |                 | Phone              |                  |
| Address   |                 | Supervisor         |                  |
| Job Title   | Starting Salary | \$                 | Ending Salary \$ |
| Responsibilities  |                 |                    |                  |
| From  | To              | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> |                 |                    |                  |

| MILITARY SERVICE                 |                   |
|----------------------------------|-------------------|
| Branch                           | From To           |
| Rank at Discharge                | Type of Discharge |
| If other than honorable, explain |                   |

| DISCLAIMER AND SIGNATURE  |      |
|---|------|
| I certify that my answers are true and complete to the best of my knowledge.  |      |
| If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. |      |
| Signature   | Date |