

## Employment Application

Name \_\_\_\_\_ Today's Date \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Date you can start \_\_\_\_\_ Salary Desired \_\_\_\_\_ Full time or Part time? \_\_\_\_\_

What hours are you available? \_\_\_\_\_

Are you a US citizen or alien authorized to work in the US? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you Employed now? \_\_\_\_\_ If so, may we inquire of your employer? \_\_\_\_\_

Ever apply to this company before? \_\_\_\_\_ If so, when \_\_\_\_\_

### **Education:**

High School \_\_\_\_\_ Graduate? \_\_\_\_\_

Subject Studied \_\_\_\_\_ Year Graduated \_\_\_\_\_

College \_\_\_\_\_ Graduate? \_\_\_\_\_

Subject Studied \_\_\_\_\_ Year Graduated \_\_\_\_\_

Trade, Business School \_\_\_\_\_ Graduate? \_\_\_\_\_

Subject Studied \_\_\_\_\_ Year Graduated \_\_\_\_\_

### **General:**

Subjects of special study or special training skills \_\_\_\_\_

\_\_\_\_\_

### **Former Employers:**

(list below last employers starting with last one first)

Name \_\_\_\_\_ Address \_\_\_\_\_

Position held \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Salary \_\_\_\_\_ Time period worked from \_\_\_\_\_ to \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Position held \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Salary \_\_\_\_\_ Time period worked from \_\_\_\_\_ to \_\_\_\_\_

**References:**

Give below the names of three persons not related to you, whom you have known at least 1 year.

Name \_\_\_\_\_ Address \_\_\_\_\_  
Business \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_  
Business \_\_\_\_\_ Years Known \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_  
Business \_\_\_\_\_ Years Known \_\_\_\_\_

**AUTHORIZATION**

“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 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 or time, or To make any agreement contrary to the foregoing, unless it is in writing and signed by an Authorized company representative.”

Date \_\_\_\_\_ Signature \_\_\_\_\_

