

APPLICATION FOR EMPLOYMENT
For Personnel use only

Employment Form

Last Name: _____

First: _____ MI: ____

Date of Application: _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Type(s) of Work Desired:

Social Security number: _____

Home telephone: _____

Work telephone: _____

How Were You Referred To Us? (Circle only one.)

A By Your College

B Advertisement

C Employment Agency

D By an Employee

If So, Give Name: _____

E Open house

F Walk-in

G Other

Please Read Carefully And Complete By Printing In Ink Or Typing.

An Equal Opportunity Employer

We are an equal opportunity employer, and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.

Provide All Information Requested.

Your complete application form will be maintained in our active files for six (6) months from the date of application. You may submit a new application at any time.

EMPLOYMENT RECORD

Starting with present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Last Or Present Company:

Type of Business:

Type or Classification of Job:

Street Address: _____

City: _____ State: _____ ZIP: _____

Phone number: _____

Brief Description of Job Duties:

Supervisor's Name: _____

Phone number: _____

Base salary: _____

Dates worked: From _____ To _____

Reason for leaving:

Last or Present Company:

Type of Business:

Type or Classification of Job:

Street Address: _____

City: _____ State: _____ ZIP: _____

Phone number: _____

Brief Description of Job Duties:

Supervisor's Name:

Phone number: _____

Base salary: _____

Dates worked: From _____ To _____

Reason for Leaving:

EDUCATIONAL HISTORY

High School:

School Name: _____

Location (city, state): _____

Major Course or Subject: _____

Dates Attended: From _____ To _____

Graduated: Yes _____ No _____

Degree: _____

Technical/Trade (after high school)

School Name: _____

Location (city, state): _____

Major Course or Subject: _____

Dates Attended: From _____ To _____

Graduated: Yes _____ No _____

Degree: _____

College (list all attended)

School Name: _____

Location (city, state): _____

Major Course or Subject: _____

Dates Attended: From _____ To _____

Graduated: Yes _____ No _____

Degree: _____

School Name: _____

Location (city, state): _____

Major Course or Subject: _____

Dates Attended: From _____ To _____

Graduated: Yes _____ No _____

Degree: _____

Other education/training

School Name: _____

Location (city, state): _____

Major Course or Subject: _____

Dates Attended: From _____ To _____

Graduated: Yes _____ No _____

Degree: _____

School name: _____

Location (city, state): _____

Major Course or Subject: _____

Dates Attended: From _____ To _____

Graduated: Yes _____ No _____

Degree: _____

OUTSIDE ACTIVITIES

(Exclude those indicating race, color, religion, sex, national origin, age, or handicap.) Professional memberships, certificates, or licenses held

Past and Present Civic or Cultural Activities (include offices held)

Principal Hobbies

SPECIAL SKILLS

To be Completed by Applicant for Office/Clerical Work

Typing: Yes ___ Words per Minute: ___ No ___

Dictation: Yes ___ Words per minute: ___ No ___

To be Completed By Applicant for Shop/Plant Work

Type of Machines Operated:

Years Experience: _____

Computer Skills

Hardware:

Software:

Please list Other Skills and/or Equipment/Language Experience You Have Acquired:

List Other Shop/Production Skills:

Served Apprenticeship:

Yes _____ Type: _____

No _____

MILITARY RECORD

Branch of Service

From _____ To _____

Present Military Affiliation:

None ___ Reserve (active) ___ Reserve (inactive) ___

Kinds of Training and Duty While in Service:

PROFESSIONAL/WORK REFERENCES

List two past supervisors and one person who is not related to you who have knowledge of your qualifications for the position for which you are applying.

Name: _____

Title/Relationship: _____

Street Address: _____

City: _____ State: _____ ZIP: _____

Phone no. (include area code) _____

Occupation: _____

May We Contact Your Present Employer?

Yes _____ No _____

Wage or Salary Required: _____

Date Available: _____

I hereby certify that the answers and other information on this application are true and correct and that I understand any misrepresentation or omission of facts on my part will be justification for separation from the company's service, if employed. I understand that my employment may be contingent upon receipt of an alien registration number, verification of birth, and any other pertinent information bearing upon my employment, and that my continued employment depends upon the will of the company or myself.

Signature

Date: _____

If any of your educational or employment records are under other than the above name, please provide other names.

