

Application for Employment

Position You Are Applying For _____ Desired Salary _____

Date Available for Work _____

| PERSONAL INFORMATION | | | |
|--|-------------------|--------------|----------|
| _____ | _____ | _____ | |
| LAST NAME | FIRST NAME | MIDDLE | |
| _____ | _____ | _____ | _____ |
| ADDRESS | CITY | STATE | ZIP CODE |
| HOME PHONE: _____ | CELL PHONE: _____ | EMAIL: _____ | |
| SOCIAL SECURITY NUMBER: _____ | | | |
| ARE YOU A U.S. CITIZEN? () YES () NO HAVE YOU BEEN CONVICTED OF A FELONY? () YES () NO | | | |
| IF SELECTED FOR EMPLOYMENT ARE YOU WILLING TO SUBMIT TO A PRE-EMPLOYMENT DRUG SCREENING TEST? () YES () NO | | | |

| EDUCATION | | | |
|-------------|----------|----------------|-----------------|
| SCHOOL NAME | LOCATION | YEARS ATTENDED | DEGREE RECEIVED |
| | | | |
| | | | |
| | | | |

| FORMER EMPLOYERS | | | |
|--------------------|--------------------------|----------|--------------------|
| DATE MONTH/YEAR | NAME/ADDRESS OF EMPLOYER | POSITION | REASON FOR LEAVING |
| | | | |
| | | | |
| | | | |
| | | | |

| REFERENCES | | |
|------------|----------------|--------------|
| NAME | CONTACT NUMBER | RELATIONSHIP |
| | | |
| | | |
| | | |

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at anytime without any previous notice.

DATE: _____ APPLICANT SIGNATURE: _____