

APPLICATION FOR EMPLOYMENT (NON-TEACHING)

Date _____

POSITION APPLYING FOR _____

NAME _____
Last First Middle
Local mailing address _____
Number Street City State ZIP
Telephone _____ **E-mail** _____
Home Business
Social Security # _____ **Passport No.** _____ **Type of Visa** _____

 1. Are you eligible to work in the U.S.? No Yes 2. Are you a SOFA ID card holder? No Yes
 3. Have you ever been arrested, convicted, or pleaded no contest to a crime? No Yes
 4. If you answered "yes" to question 3, please specify the conviction. _____

 Available for employment from _____ to _____ Minimum salary range acceptable: \$ _____ / per month
 Categories available: Full-time Part-time
 Have you filed an application here before? No Yes If yes, give date _____
 Have you ever been employed here before? No Yes If yes, give date _____

FOR FAMILY MEMBERS OF U.S. FORCES PERSONNEL
Sponsor's name _____ **Relationship** _____
Squadron _____ **Duty Phone** _____

Schools/Colleges Attended	Name and Address of School	Dates From To	Number of Years and Credit Hours Completed	Major(s) or Type of Program	Degree Granted or Certification and Date
High School or Grade Diploma					
College (Submit Transcript)					
Graduate School (Submit Transcript if Graduated)					
Vocational/Business School					

Note: If selected for employment, official transcripts are required from regionally accredited institutions.

Are you proficient at using any of the following? Check all that apply.
 Microsoft Word Microsoft Power Point Other word processing program (specify) _____
 Microsoft Excel People Soft Other spreadsheet program (specify) _____
 Microsoft Access CS3 or CS4 Other program (specify) _____

 List additional special qualifications and skills (computer programming languages known, foreign languages spoken, etc.):

 If you are not selected for the position, do you want to be considered for other positions? Yes No

EMPLOYMENT RECORD

**BEGIN WITH LAST POSITION HELD, OR PRESENT POSITION
IF NOW EMPLOYED**

Your former employers will be used as references.
May we contact your present employer? If "no" please explain.
 yes no

Employer	Dates of Employment	List your Duties and Responsibilities
Address	From To	
Telephone	MO YR MO YR	
Your Title		
Name and Title of Supervisor	HOURLY RATE/ SALARY	
Explain your reason for leaving	START FINAL	
Employer	Dates of Employment	List your Duties and Responsibilities
Address	From To	
Telephone	MO YR MO YR	
Your Title		
Name and Title of Supervisor	HOURLY RATE/ SALARY	
Explain your reason for leaving	START FINAL	
Employer	Dates of Employment	List your Duties and Responsibilities
Address	From To	
Telephone	MO YR MO YR	
Your Title		
Name and Title of Supervisor	HOURLY RATE/ SALARY	
Explain your reason for leaving	START FINAL	

References (List references, other than family members and friends, who have knowledge of your work experience, job capabilities, and potential.)

Name _____
 Address _____
 Telephone _____
 Relationship _____

Name _____	Name _____
Address _____	Address _____
Telephone _____	Telephone _____
Relationship _____	Relationship _____

I certify that all information on this application is accurate and subject to verification. I understand that my initial and subsequent employment is contingent on the accuracy of this application.

**DO NOT WRITE IN THIS SECTION
TYPING SCORE:**

Signature of Applicant