



Application for Employment

EQUAL OPPORTUNITY EMPLOYER. It is our policy to abide by all Federal and State laws prohibiting employment discrimination solely on the basis of a person's race, color, creed, national origin, age (over 40), sex marital status, or physical handicap.

PLEASE TYPE OR PRINT IN INK

Date _____ 20____

Name _____

Social Security No. _____

Street _____

How Long? _____

City _____

State/ZIP _____

Day phone _____

Home phone _____

Previous address _____

How Long? _____

Position for which you are applying _____

Check the following options you would consider Full Time Part Time Temporary? If part time, specify hours of days: _____

What is your minimum salary requirement? _____ Date available to work? _____

Do you have any commitments to another employer that might affect your employment with us? _____

EDUCATION AND TRAINING

School	Print Name, City and State	Degree/Major/Course of Study	Years/From-To
High School			
College			
Graduate School			
Trade School			

List any other education, training, special skills or certificates/licenses that you possess related to this job _____

List any machines or equipment on which you are qualified and experienced in operating _____

Typing speed (words per minute) _____ Dictation speed (words per minute) _____

List any languages that you fluently speak _____ read/write _____

Do you have a valid driver's license in this state? Yes No

Military Experience? Yes No If yes, what branch?

Dates of duty (from) _____ to _____ Rank at separation _____

GENERAL INFORMATION

Can you, after employment, submit a birth certificate or other proof of U.S. Citizenship? Yes No

If not a citizen, can you, after employment, submit verification of your legal right to work permanently in the U.S.? Yes No

Are you between the ages of 18 and 70? Yes No If minor, state age _____

Were you previously employed by this organization? Yes No Dates _____

List any relatives working for this organization _____

Have you ever been convicted of a felony or pleaded no contest in a felony, or been convicted of a misdemeanor resulting in imprisonment or a fine over \$500 during the last ten years (conviction will not necessarily disqualify an applicant).

Yes No If yes, explain _____

EMPLOYMENT HISTORY

List all work experience beginning with the present or most recent job (use back of application if necessary).

NAME OF EMPLOYER	TYPE OF BUSINESS		
ADDRESS	CITY	STATE	ZIP
DATES EMPLOYED (FROM-TO)	TITLE		
NAME AND TITLE OF SUPERVISOR	TELEPHONE NUMBER		
MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO	WAS EMPLOYMENT... <input type="checkbox"/> PART TIME <input type="checkbox"/> FULL TIME		
BRIEF DESCRIPTION OF DUTIES			
REASON FOR LEAVING	LAST SALARY		

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