

## **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 TY	PE OR PRINT IN INK	Date	20					
Name		Social Security No	Social Security No					
Street		How Long?	How Long?					
City		State/ZIP	State/ZIP					
Day phone		Home phone						
Previous add	dress	How Long?						
Position for	which you are applying							
Check the fo	ollowing options you would consider ☐ Full Time ☐ Part Time ☐	Temporary? If part time, specify hours of day	/s:					
What is you	r minimum salary requirement?	Date available to work?						
Do you have	e any commitments to another employer that might affect your employ	ment with us?						
EDUCATIO	ON AND TRAINING							
School	Print Name, City and State	Degree/Major/Course of Study	Years/From-To					
High School								
Tilgit School								
College								
Graduate School								
Trade								
School								
List any othe	er education, training, special skills or certificates/licenses that you po	ossess related to this job						
Liot any other	or education, training, operation of our throates, not need that you pe							
List any mad	chines or equipment on which you are qualified and experienced in or	perating						
2.01 0.1701	similar an equipment on miles, you are quantities and onpenended in eq							
Typing spee	d (words per minute)	Dictation speed (words per minute)						
			read/write					
	e a valid driver's license in this state? ☐ Yes ☐ No							
-	erience? ☐ Yes ☐ No If yes, what branch?							
Dates of dut	ty (from) to Rank at separation							
GENERAL	INFORMATION							
	ter employment, submit a birth certificate or other proof of U.S. Citizer	•	Nie					
	en, can you, after employment, submit verification of your legal right to ween the ages of 18 and 70? $\ \square$ Yes $\ \square$ No $\ $ If minor, state age $\_$		NO					
-								
List any rela	tives working for this organization							
•	ver been convicted of a felony or pleaded no contest in a felony, or be ast ten years (conviction will not necessarily disqualify an applicant).	en convicted of a misdemeanor resulting in i	mprisonment or a fine over \$500					
□ Yes □ I	No If yes, explain							

## **EMPLOYMENT HISTORY**

Li	st al	wor	k experienc	e beginning	, with the	e present	or most	recent jo	b (use	back o	f application	on if	necessary)	١.

NAME OF EMPLOYER	TYPE OF BUSINESS	
ADDRESS	CITY S	TATE ZIP
DATES EMPLOYED (FROM-TO)	TITLE	
NAME AND TITLE OF SUPERVISOR	TELEPHONE NUMBER	
MAY WE CONTACT?	WAS EMPLOYMENT	
□ YES □ NO	□ PART TIME □ FU	LL TIME
BRIEF DESCRIPTION OF DUTIES		
REASON FOR LEAVING	LAST SALARY	
NAME OF EMPLOYER	TYPE OF BUSINESS	
ADDRESS	CITY	TATE ZIP
DATES EMPLOYED (FROM-TO)	TITLE	
NAME AND TITLE OF SUPERVISOR	TELEPHONE NUMBER	
MAY WE CONTACT?	WAS EMPLOYMENT	
□ YES □ NO BRIEF DESCRIPTION OF DUTIES	□ PART TIME □ FU	ILL TIME
REASON FOR LEAVING	LAST SALARY	
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DATES EMPLOYED (FROM-TO)	TITLE	
NAME AND TITLE OF SUPERVISOR	TELEPHONE NUMBER	
MAY WE CONTACT?	WAS EMPLOYMENT □ PART TIME □ FU	LL TIME
BRIEF DESCRIPTION OF DUTIES		
REASON FOR LEAVING	LAST SALARY	
NAME OF EMPLOYER	TYPE OF BUSINESS	
ADDRESS	CITY S	TATE ZIP
DATES EMPLOYED (FROM-TO)	TITLE	
NAME AND TITLE OF SUPERVISOR	TELEPHONE NUMBER	
MAY WE CONTACT?	WAS EMPLOYMENT	
□ YES □ NO	☐ PART TIME ☐ FU	LL TIME
BRIEF DESCRIPTION OF DUTIES		
REASON FOR LEAVING	LAST SALARY	

Name and address	Occupation	Phone
1		
2		
3		
PERSON TO NOTIFY IN CASE OF EMERGENCY		
Name	Teleph	one
Address		
OTHER INFORMATION Please include any other information you think would be helpful to published, activities, accomplishments, honors received, etc. (You remaind the complex of the complex		
AGREEMENT (Please read the following statements carefully.)		
I hereby affirm that the information provided on this applic falsified information or significant omissions may disqualify for dismissal if discovered at a later date.		
I understand that my employment can be terminated, with understand that no management official other than the prothe foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of control of the foregoing or make any oral assurance or promise of the foregoing or make any oral assurance or promise of the foregoing or make any oral assurance or promise of the foregoing or make any oral assurance or promise of the foregoing or make any oral assurance or promise of the foregoing or make any oral assurance or promise of the foregoing or make any oral assurance or promise of the foregoing or make any oral assurance or promise or the foregoing or make any oral assurance or promise or the foregoing or make any oral assurance or promise or the foregoing or make any oral assurance or promise or the foregoing or make any oral assurance or promise or the foregoing or make any oral assurance or promise or the foregoing or make any oral assurance or promise or the foregoing or make any oral assurance or promise or the foregoing or make any oral assurance or promise or the foregoing or make any oral assurance or the foregoing or	esident of the company has any authority to ent	
I authorize persons, credit bureaus, present and former la previous employers and organizations named in this appli- may be required to arrive at an employment decision.		
DATE	SIGNATURE	
	5.5.7 H OHE	