



**Lighthouse Property Management**  
 460 N Tamiami Tr  
 Osprey, Florida 34229  
 Office 941-460-5560 Fax 941-451-8059  
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## APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE / AN EQUAL OPPORTUNITY EMPLOYER (PAGE 1 OF 4)

### PERSONAL INFORMATION

Please include present address and previous addresses for the past 7 years starting with most recent residence.

LAST NAME	FIRST NAME	TODAY'S DATE		
<b>ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>	<b>YEARS / MONTHS</b>
CURRENT ADDRESS				
PREVIOUS ADDRESS				
PREVIOUS ADDRESS				

<b>Are you a smoker?</b> Yes ( )      No ( )	<b>Do you own your home:</b> Yes ( )      No ( )	<b>CELL PHONE:</b>  
<b>PERSONAL EMAIL ADDRESS:</b>  		

### DESIRED EMPLOYMENT

<b>POSITION:</b>  	<b>DATE YOU CAN START:</b>  	<b>WAGE DESIRED:</b>  
<b>ARE YOU EMPLOYED NOW?</b> YES ( )      NO ( )	<b>IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER:</b> YES ( )      NO ( )	

<b>WHO REFERRED YOU TO US?</b>			
<input type="checkbox"/> EMPLOYMENT AGENCY	<input type="checkbox"/> WALK-IN	<input type="checkbox"/> NEWSPAPER AD	<input type="checkbox"/> STATE EMPLOYMENT OFFICE
<input type="checkbox"/> FRIEND	<input type="checkbox"/> INTERNET AD	<input type="checkbox"/> HEAD HUNTER	OTHER: _____

# APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE (PAGE 2 OF 4)

## EDUCATION, TRAINING AND SKILLS CONTINUED

DEGREES, CERTIFICATES, LICENSES	CITY	STATE	YEAR COMPLETED

COMPUTER KNOWLEDGE	YEARS EXPERIENCE:
SFTWARE, TOOLS OR EQUIPMENT EXPERTISE	

## FORMER EMPLOYERS – LIST YOUR LAST FOUR EMPLOYERS STARTING WITH THE MOST RECENT

LAST OR CURRENT EMPLOYER NAME:		ADDRESS:			CITY:	STATE:	ZIP:
SUPERVISOR PHONE:	START DATE:	LEAVE DATE:	YOUR JOB TITLE:		NAME & TITLE OF YOUR SUPERVISOR:		
WEEKLY STARTING SALARY / HOURLY WAGE:		WEEKLY FINAL SALARY / HOURLY WAGE:		MAY WE CONTACT EMPLOYER? YES ( )      NO ( )			
DESCRIPTION OF WORK YOU PERFORMED:							
REASON FOR LEAVING:							

EMPLOYER NAME:		ADDRESS:			CITY:	STATE:	ZIP:
SUPERVISOR PHONE:	START DATE:	LEAVE DATE:	YOUR JOB TITLE:		NAME & TITLE OF SUPERVISOR:		
WEEKLY STARTING SALARY / HOURLY WAGE:		WEEKLY FINAL SALARY / HOURLY WAGE:		MAY WE CONTACT THIS EMPLOYER? YES ( )      NO ( )			
DESCRIPTION OF WORK YOU PERFORMED:							
REASON FOR LEAVING:							

# APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE (PAGE 3 OF 4)

## **FORMER EMPLOYERS CONTINUED** – LIST YOUR LAST FOUR EMPLOYERS STARTING WITH THE MOST RECENT

EMPLOYER NAME:			ADDRESS:			CITY:	STATE:	ZIP:
SUPERVISOR PHONE:	START DATE:	LEAVE DATE:	YOUR JOB TITLE:		NAME & TITLE OF YOUR SUPERVISOR:			
WEEKLY STARTING SALARY / HOURLY WAGE:		WEEKLY FINAL SALARY / HOURLY WAGE:		MAY WE CONTACT EMPLOYER? YES ( )      NO ( )				
DESCRIPTION OF WORK YOU PERFORMED:								
REASON FOR LEAVING:								

LAST OR CURRENT EMPLOYER NAME:			ADDRESS:			CITY:	STATE:	ZIP:
SUPERVISOR PHONE:	START DATE:	LEAVE DATE:	YOUR JOB TITLE:		NAME & TITLE OF YOUR SUPERVISOR:			
WEEKLY STARTING SALARY / HOURLY WAGE:		WEEKLY FINAL SALARY / HOURLY WAGE:		MAY WE CONTACT EMPLOYER? YES ( )      NO ( )				
DESCRIPTION OF WORK YOU PERFORMED:								
REASON FOR LEAVING:								

EMPLOYER NAME:			ADDRESS:			CITY:	STATE:	ZIP:
SUPERVISOR PHONE:	START DATE:	LEAVE DATE:	YOUR JOB TITLE:		NAME & TITLE OF SUPERVISOR:			
WEEKLY STARTING SALARY / HOURLY WAGE:		WEEKLY FINAL SALARY / HOURLY WAGE:		MAY WE CONTACT THIS EMPLOYER? YES ( )      NO ( )				
DESCRIPTION OF WORK YOU PERFORMED:								
REASON FOR LEAVING:								

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PRE-EMPLOYMENT QUESTIONNAIRE (PAGE 3 OF 4)

## MILITARY SERVICE

HAVE YOU SERVED IN THE U.S. ARMED FORCES? YES ( ) NO ( )		BRANCH OF SERVICE?	RANK:
YEARS SERVED?	DID YOU RECEIVE ANHONORABLE DISCHARGE? YES ( ) NO ( )	DATE OF DISCHARGE:	

HAVE YOUR EVER BEEN CONVICTED OF, PLED GUILTY / NO CONTEST TO, OR HAD A SUSPENDED IMPOSITION OF SENTENCE FOR ANY OFFENSE (OTHER THAN A MINOR TRAFFIC VIOLATION) ( ) YES ( ) NO

**IF YES, PLEASE EXPLAIN HERE:** (A CONVICTION RECORD WILL NOT NECESSARILY EXCLUDE YOU FROM CONSIDERATION. THIS INFORMATION IS FOR JOB RELATED PURPOSES AND ONLY USED TO THE EXTENT PERMITTED BY LAW)

"I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT IF EMPLOYED, FALSE STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL."

"I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HERE-IN AND THE REFERENCES AND EMPLOYERS LISTED MAY GIVE YOU ANY INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY HAVE, PERSONAL OR OTHERWISE AND RELEASE THE COMPANY FROM ANY LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION"

"I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGN BY AN AUTHORIZED COMPANY REPRESENTATIVE."

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE