



Application for Employment

Questions must be answered in your own handwriting. Complete all questions.

NAME _____
Last First Middle

ADDRESS _____
City State Zip Code

Social Security No. Home Phone Work Phone Also known as:

Position Desired: _____ Salary Required: _____

Start Date: _____ Personal Goals: _____

May we contact your present employer? _____ Current Salary: _____ Are you 18? _____

Are you related to anyone in our employ? _____ Name: _____

Referred by: _____ Ever applied here before? _____ When: _____

Do you have any restrictions on hours or travel? _____

Special Skills or knowledge: _____

Have you been convicted of a felony, misdemeanor or been in prison in the past 7 years? _____

(This information may not prevent you from being hired.) If yes, please explain: _____

Will Visa or immigration laws prevent employment? _____

Have you ever been denied Workers Compensation? _____ How many times? _____

When: _____ Where: _____

REFERENCES (List below the names of three persons not related to you whom you have known at least one year.)

Name	Address	Phone	Business	Yrs known
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In an emergency contact: _____ City/State _____ Phone: _____

EDUCATION Name/Location of School Subjects Studied Did you graduate?

High School _____

College _____

Trade, Business _____

Other training _____

Degrees/Certificates Earned: _____

Applicants who are unable to answer in their own handwriting may make other arrangements for answering

EMPLOYMENT HISTORY: Begin with your most recent employer. Include all employment for the last ten years. List any periods and reason for self-employment and/or unemployment. Use additional pages if necessary

Employment Dates (Mo-Yr) to (Mo-Yr)	Job Title	Employer Name

Supervisor: _____	Last Salary: _____	Location: _____
Experience Learned: _____	Telephone: _____	

Reason for Leaving: _____		
Employment verification: _____		Initials: _____
Employment Dates (Mo-Yr) to (Mo-Yr)	Job Title	Employer Name

Supervisor: _____	Last Salary: _____	Location: _____
Experience Learned: _____	Telephone: _____	

Reason for Leaving: _____		
Employment verification: _____		Initials: _____
Employment Dates (Mo-Yr) to (Mo-Yr)	Job Title	Employer Name

Supervisor: _____	Last Salary: _____	Location: _____
Experience Learned: _____	Telephone: _____	

Reason for Leaving: _____		
Employment verification: _____		Initials: _____
Employment Dates (Mo-Yr) to (Mo-Yr)	Job Title	Employer Name

Supervisor: _____	Last Salary: _____	Location: _____
Experience Learned: _____	Telephone: _____	

Reason for Leaving: _____		
Employment verification: _____		Initials: _____

Describe the duties and responsibilities of your most recent job:

Describe a recent experience in which you did a good job:

How do you know you have done a good job?

What do you want in a job?

What do you like about working?

What is important to you about working?

How do you handle conflict? Describe a recent experience that was negative. How did you deal with that situation? What did you do that felt comfortable? What would you do differently?

Describe a project you were involved in that required a team effort. What specific contributions did you make?

Have you ever been involved in a task/project that required you to work alone? If so, describe your responsibilities and accomplishments.

What do you know about this company and/or the position you are applying for?

Describe the management style you like best. Describe the management style you are least comfortable with.

THIS COMPANY RESERVES THE RIGHT TO CONDUCT PRE-EMPLOYMENT AND EMPLOYMENT DRUG TESTING

I authorize investigation of all statements contained in this application. I understand that any misinterpretation or omission of facts is cause for dismissal. Furthermore, I understand and agree that my employment is for no definite period of time and may, regardless of the date of payment of my wages or salary, be terminated without any previous notice. I understand that this is not a contract between the employer and me.

Signature _____

Date: _____

Qualified applicants receive consideration for employment without discrimination because of gender, sexual preference, marital status, race, color, creed, national origin, age, religion, or the presence of a disability

TO BE COMPLETED BY COMPANY REPRESENTATIVE

Date: _____ Time: _____
Interview: Yes _____ No _____
Acceptable for Employment? Yes _____ No _____
Start Date: _____
Rate: _____
Special Considerations: _____

Interviewed by: _____

BACKGROUND SCREENING

RESULTS

Criminal	<input type="checkbox"/>	_____
DMV	<input type="checkbox"/>	_____
Civil	<input type="checkbox"/>	_____

Personal References:

Application Verified By: _____

Approved By: _____

NOTES
