

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION					
					DATE _____
NAME			SOCIAL SECURITY NUMBER		
PRESENT ADDRESS		LAST	FIRST	MIDDLE	
PERMANENT ADDRESS		STREET	CITY	STATE	ZIP
PHONE NO.	STREET	REFERRED BY	CITY	STATE	ZIP

LAST
FIRST
MIDDLE

EMPLOYMENT DESIRED		
POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED?	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?	
EVER APPLIED TO THIS COMPANY BEFORE?	WHERE?	WHEN?

EDUCATION		NAME AND LOCATION OF SCHOOL	SUBJECTS STUDIED
GRAMMAR SCHOOL			
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL			

GENERAL		
SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK		
WHAT FOREIGN LANGUAGES DO YOU SPEAK FLUENTLY?	READ	WRITE
U.S. MILITARY OR NAVAL SERVICE	RANK	PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES



IN CASE OF EMERGENCY NOTIFY	NAME	ADDRESS	PHONE NO.
-----------------------------	------	---------	-----------

FORMER EMPLOYERS

(LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM TO				
FROM TO				
FROM TO				
FROM TO				

REFERENCES:

GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

	NAME	BUSINESS	TELEPHONE NUMBER	YEARS KNOWN
1				
2				
3				

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL, FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

DATE

SIGNATURE

INTERVIEWED BY

DO NOT WRITE BELOW THIS LINE

DATE

REMARKS:

REMARKS:

NEATNESS		CHARACTER	
PERSONALITY		ABILITY	

HIRED

FOR DEPT.

POSITION

WILL REPORT

SALARY
WAGES

APPROVED: 1.

2.

3.

EMPLOYMENT MANAGER

DEPT. HEAD

GENERAL MANAGER

THIS FORM HAS BEEN DESIGNED TO COMPLY WITH STATE AND FEDERAL FAIR EMPLOYMENT PRACTICE LAWS PROHIBITING DISCRIMINATION ON THE BASIS OF AN APPLICANT'S SEX OR MINORITY STATUS. QUESTIONS DIRECTLY OR INDIRECTLY REFLECTING SUCH STATUS HAVE BEEN INCLUDED ONLY WHERE NEEDED TO DETERMINE A BONA FIDE OCCUPATIONAL QUALIFICATION OR FOR OTHER PERMISSIBLE PURPOSES, SUCH QUESTIONS ARE APPROPRIATELY NOTED ON THE APPLICATION. NOTWITHSTANDING THESE EFFORTS, THE MANUFACTURER OF THIS FORM ASSUMES NO RESPONSIBILITY AND HEREBY DISCLAIMS ANY LIABILITY FOR INCLUSION IN THIS FORM, OF ANY QUESTIONS UPON WHICH A VIOLATION OF STATE AND FEDERAL FAIR EMPLOYMENT PRACTICE LAWS MAY BE BASED.