

# APPLICATION FOR EMPLOYMENT

Name \_\_\_\_\_ Date \_\_\_\_\_

Social Security No: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Do you have reliable transportation to meet any scheduled shift? \_\_\_\_\_ Explain \_\_\_\_\_

Can you read at a 6th grade level? \_\_\_\_\_ Have you been convicted of a felony? \_\_\_\_\_ If yes, please give details \_\_\_\_\_

Have you ever applied here before? \_\_\_\_\_ If so, approximately when? \_\_\_\_\_

Have you ever worked for us before? \_\_\_\_\_ If so, under what name? \_\_\_\_\_

Do you have any friends or relatives working for us? \_\_\_\_\_ Who? \_\_\_\_\_

Can you provide proof that you are over 18 years old? \_\_\_\_\_ Over 21 years old? \_\_\_\_\_

Are you a smoker? \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_\_ Class \_\_\_\_\_ State \_\_\_\_\_ License No. \_\_\_\_\_

Have you had any accidents or moving violations in the past three years? \_\_\_\_\_ If yes, please provide details \_\_\_\_\_

Do you have a legal right to work in the U.S.? \_\_\_\_\_ Can you provide documentation? \_\_\_\_\_

Is there any reason why you could not perform all physical aspects of this job (including the ability to lift up to 50 lb.)? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

Describe your use of drugs and alcohol: \_\_\_\_\_

For what position are you applying for? \_\_\_\_\_ Salary Requirement: \$ \_\_\_\_\_

Would you accept another position? \_\_\_\_\_ If so, which one? \_\_\_\_\_

Would you prefer full or part time work? \_\_\_\_\_ If part time, about how many hours per week? \_\_\_\_\_

When would you be available to start work? \_\_\_\_\_

Please specify below when you are available to work for each day of the week.

**MON TUE WED THU FRI SAT SUN**

**AM PM AM PM AM PM AM PM AM PM AM PM AM PM**

## ABOUT YOUR WORK EXPERIENCE

**PLEASE START WITH YOUR MOST RECENT POSITION**      **RESUME ATTACHED?** \_\_\_\_\_

COMPANY \_\_\_\_\_ Mo/Yr Hired \_\_\_\_\_ Mo/Yr Left \_\_\_\_\_

Address \_\_\_\_\_

—

Job Title \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Superior's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Major Responsibilities and Accomplishments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

COMPANY \_\_\_\_\_ Mo/Yr Hired \_\_\_\_\_ Mo/Yr Left \_\_\_\_\_

Address \_\_\_\_\_

—

Job Title \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Superior's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Major Responsibilities and Accomplishments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

COMPANY \_\_\_\_\_ Mo/Yr Hired \_\_\_\_\_ Mo/Yr Left \_\_\_\_\_

Address \_\_\_\_\_

—

Job Title \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Starting Salary: \_\_\_\_\_ Final Salary: \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Superior's Name \_\_\_\_\_ Position \_\_\_\_\_ Phone \_\_\_\_\_

Major Responsibilities and Accomplishments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## ABOUT YOUR EDUCATION

HIGH SCHOOL \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Did you graduate? \_\_\_\_\_

COLLEGE \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

No. of Yrs. Completed \_\_\_\_\_ Major \_\_\_\_\_ Degree \_\_\_\_\_

GRAD SCHOOL \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

No. of Yrs. Completed \_\_\_\_\_ Major \_\_\_\_\_ Degree \_\_\_\_\_

Extra Curricular Activities: \_\_\_\_\_

Other Training Programs: \_\_\_\_\_

Professional memberships and certifications: \_\_\_\_\_

## REFERENCES

List three people we can contact who can attest to your character.

1. \_\_\_\_\_ Phone no. \_\_\_\_\_

2. \_\_\_\_\_ Phone no. \_\_\_\_\_

3. \_\_\_\_\_ Phone no. \_\_\_\_\_

## OTHER COMMENTS

Why would you be a good choice for this position? \_\_\_\_\_

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I certify the information above is complete and accurate to the best of my knowledge. I authorize the individuals, companies and agencies concerned to provide this company and its agents with all information necessary to verify the statements I have made in this application and I release them from any liability for so doing. I understand I must receive satisfactory references from previous employers, before an offer of employment can be made. I understand that incomplete or unsigned applications will not be considered and that false, incomplete or misleading statements are grounds for my immediate discharge. I understand that any offer of employment is contingent upon my passing a prescribed physical examination, proving my identity and documenting my right to work. I understand these policies cannot be changed except in writing.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Date: \_\_\_\_\_