

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION				DATE
NAME			SOCIAL SECURITY NUMBER	
LAST	FIRST	MIDDLE		
PRESENT ADDRESS				
STREET		CITY	STATE	
PERMANENT ADDRESS				
STREET		CITY	STATE	
PHONE NO.			REFERRED BY	
EMPLOYMENT DESIRED				
POSITION		DATE YOU CAN START		SALARY DESIRED
ARE YOU EMPLOYED NOW?			IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?	
EVER APPLIED TO THIS COMPANY BEFORE?			WHERE?	WHEN?

LAST
FIRST
MIDDLE

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

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	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

(CONTINUED ON THE OTHER SIDE)

GENERAL

U.S. MILITARY OR
NAVAL SERVICE

RANK

PRESENT MEMBERSHIP IN
NATIONAL GUARD OR RESERVES

HAVE YOU EVER BEEN CONVICTED OF A CRIME RELATED TO THEFT, EMBEZZLEMENT, VIOLENCE OR SIMILAR OFFENSES?

YES NO IF YES, PLEASE EXPLAIN _____

IS ANY ADDITIONAL INFORMATION RELATIVE TO CHANGE OF NAME, USE OF AN ASSUMED NAME OR NICKNAME NECESSARY TO ENABLE A CHECK OF YOUR WORK RECORD? YES NO IF YES, PLEASE EXPLAIN _____

ARE YOU A CITIZEN OF THE UNITED STATES? YES NO YOU MUST BE ABLE TO PROVIDE TWO I.D.'S

WE EXPECT ALL PERSONS TO BE HERE EVERYDAY! CAN YOU COME TO WORK CONSISTENTLY? YES NO
CAN YOU WORK OVERTIME ON SHORT NOTICE? YES NO

PLEASE READ THE FOLLOWING CONDITIONS OF EMPLOYMENT

(IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK BEFORE SIGNING)

ALL EMPLOYMENT ARRANGEMENTS ARE BASED ON "EMPLOYMENT AT WILL" PRINCIPLES. EMPLOYMENT MAY BE TERMINATED AT ANY TIME AT THE DISCRETION OF EITHER THE COMPANY OR THE INDIVIDUAL EMPLOYEE IN WHICH EVENT THE OBLIGATION OF THE COMPANY SHALL END WITH THE PAYMENT OF EARNED COMPENSATION THROUGH THE LAST DAY OF EMPLOYMENT. NO NOTICE OR CAUSE IS REQUIRED FOR TERMINATION BY EITHER THE COMPANY OR THE INDIVIDUAL EMPLOYEE.

IN PROCESSING THIS EMPLOYMENT APPLICATION, THE EMPLOYER MAY REQUEST THAT AN INVESTIGATIVE REPORT BE PREPARED, WHICH MAY INCLUDE INFORMATION CONCERNING POSSIBLE CONVICTION RECORDS. YOU HAVE THE RIGHT TO REQUEST THAT THE EMPLOYER COMPLETELY AND ACCURATELY DISCLOSE TO YOU THE NATURE AND SCOPE OF THE INVESTIGATION REQUESTED. SUCH A REQUEST MUST BE MADE IN WRITING TO THE PERSONNEL DEPARTMENT OF THE EMPLOYER WITHIN A REASONABLE TIME AFTER YOU COMPLETE THIS APPLICATION.

THIS APPLICATION WILL BE GIVEN EVERY CONSIDERATION, BUT IT'S RECEIPT DOES NOT IMPLY THAT THE APPLICANT WILL BE EMPLOYED. THE EMPLOYER MAY AT ITS OWN EXPENSE, ARRANGE FOR A SURETY BOND FOR EACH OF ITS EMPLOYEES. UNLESS THE APPLICANT'S BACKGROUND IS ACCEPTABLE TO A SURETY COMPANY (NOT RELATIVE TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, HANDICAP, OR STATUS AS A SPECIAL DISABLED OR VIETNAM ERA VETERAN), IT WILL BE DIFFICULT TO SECURE THIS BOND AND THE EMPLOYER MAY BE UNABLE TO OFFER EMPLOYMENT.

I AUTHORIZE PERSONS, CURRENT EMPLOYER (IF APPLICABLE) AND PREVIOUS EMPLOYERS AND ORGANIZATIONS NAMED IN THIS APPLICATION (AND ACCOMPANYING RESUME, IF ANY) TO PROVIDE THE EMPLOYER WITH ANY RELEVANT INFORMATION THAT MAY BE REQUIRED TO ARRIVE AT AN EMPLOYMENT DECISION. IN THE EVENT OF MY EMPLOYMENT TO A POSITION WITH EMPLOYER, I WILL COMPLY WITH ALL RULES AND REGULATIONS AS SET FORTH IN THE EMPLOYER POLICY MANUAL OR OTHER COMMUNICATIONS DISTRIBUTED TO ALL EMPLOYEES, AND WILL AGREE TO BE FINGERPRINTED, IF REQUIRED. ADDITIONALLY, I AUTHORIZE THE EMPLOYER TO SUPPLY MY EMPLOYMENT RECORD, IN WHOLE OR IN PART, AND IN CONFIDENCE, TO ANY PROSPECTIVE EMPLOYER, GOVERNMENT AGENCY, OR OTHER PARTY WITH A LEGAL AND PROPER INTEREST.

I CERTIFY THAT ALL STATEMENTS MADE BY ME ON THIS APPLICATION (AND ACCOMPANYING RESUME, IF ANY) ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND THAT I HAVE WITHHELD NOTHING THAT WOULD, IF DISCLOSED, AFFECT THIS APPLICATION UNFAVORABLY.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I ALSO AUTHORIZE A CREDIT REPORT INVESTIGATION TO BE MADE CONCERNING MY CHARACTER, GENERAL REPUTATION AND CREDIT THROUGH CONSUMER REPORTING AGENCIES.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THE ABOVE STATEMENT AND UNDERSTAND THE SAME.

DATE _____ SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY _____ DATE _____

DATE OF HIRE _____ SALARY _____

LOCATION _____ POSITION _____