APPLICATION FOR EMPLOYMENT

Company _____

Address _____

City _____

APPLICANT TO COMPLETE ALL INFORMATION REQUESTED
PLEASE PRINT

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, disability, veteran status, or any other protected group status.

Date _____

Name _____
    First   Middle   Last

Present address _____
    No.   Street   City   State   Zip

Previous address _____
    No.   Street   City   State   Zip

Telephone Number (____) _____ Email address _____

Do you have a legal right to be employed in the United States? ☐ Yes (proof required) ☐ No

Are you over the age of 18? ☐ Yes ☐ No

COMPANY EXPERIENCE

Have you worked for this company before? _____ Dates: From _____ To _____
    Month/Year   Month/Year

Where? _____ Position _____

Reason for leaving _____

GENERAL

Position applying for _____ ☐ Full Time ☐ Part Time ☐ Temporary ☐ Seasonal

Who referred you? _____ Rate of pay expected _____

EDUCATIONAL BACKGROUND

Type of School	Name and City	Did You Graduate?	Course or Major
College			
Technical School			
High School			
Other			

LIST ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH MOST RECENT

1

COMPANY NAME

ADDRESS, CITY, STATE, ZIP

PHONE NO. (   )
TYPE OF BUSINESS

NAME OF SUPERVISOR

DATES WORKED		POSITION(S) HELD
FROM	TO	

DUTIES / RESPONSIBILITIES

REASON FOR LEAVING

BASE GROSS INCOME $ STARTING WAGE   per ☐ HOUR ☐ YEAR   ENDING/CURRENT $ per ☐ HOUR ☐ YEAR   ☐ BONUS ☐ INCENTIVES   AMOUNT RECEIVED $ WORK HOURS:

2

COMPANY NAME

ADDRESS, CITY, STATE, ZIP

PHONE NO. (   )
TYPE OF BUSINESS

NAME OF SUPERVISOR

DATES WORKED		POSITION(S) HELD
FROM	TO	

DUTIES / RESPONSIBILITIES

REASON FOR LEAVING

BASE GROSS INCOME $ STARTING WAGE   per ☐ HOUR ☐ YEAR   ENDING $ per ☐ HOUR ☐ YEAR   ☐ BONUS ☐ INCENTIVES   AMOUNT RECEIVED $ WORK HOURS:

3

COMPANY NAME

ADDRESS, CITY, STATE, ZIP

PHONE NO. (   )
TYPE OF BUSINESS

NAME OF SUPERVISOR

DATES WORKED		POSITION(S) HELD
FROM	TO	

DUTIES / RESPONSIBILITIES

REASON FOR LEAVING

BASE GROSS INCOME $ STARTING WAGE   per ☐ HOUR ☐ YEAR   ENDING $ per ☐ HOUR ☐ YEAR   ☐ BONUS ☐ INCENTIVES   AMOUNT RECEIVED $ WORK HOURS:

4

COMPANY NAME

ADDRESS, CITY, STATE, ZIP

PHONE NO. (   )
TYPE OF BUSINESS

NAME OF SUPERVISOR

DATES WORKED		POSITION(S) HELD
FROM	TO	

DUTIES / RESPONSIBILITIES

REASON FOR LEAVING

BASE GROSS INCOME $ STARTING WAGE   per ☐ HOUR ☐ YEAR   ENDING $ per ☐ HOUR ☐ YEAR   ☐ BONUS ☐ INCENTIVES   AMOUNT RECEIVED $ WORK HOURS:

WORK REFERENCES

NAME	YEARS KNOWN	RELATIONSHIP AND TITLE		
COMPANY				
WORK ADDRESS CITY	STATE	HOME PHONE	WORK PHONE	

NAME	YEARS KNOWN	RELATIONSHIP AND TITLE		
COMPANY				
WORK ADDRESS CITY	STATE	HOME PHONE	WORK PHONE	

NAME	YEARS KNOWN	RELATIONSHIP AND TITLE		
COMPANY				
WORK ADDRESS CITY	STATE	HOME PHONE	WORK PHONE	

NAME	YEARS KNOWN	RELATIONSHIP AND TITLE		
COMPANY				
WORK ADDRESS CITY	STATE	HOME PHONE	WORK PHONE	

SPECIAL SKILLS

Please check the skills for which you have received training:

☐ Word Processing   (WPM _____)   ☐ Data Entry   ☐ 10 - Key Calculator

☐ Software Packages: _____

☐ Programming Languages: _____

☐ Database: _____

☐ Manufacturing Equipment: _____

☐ Other: _____

_____

APPLICANT MUST READ AND SIGN

I certify that I have read and understood all of this employment application. It is agreed and understood that the employer or his agents may investigate my background to ascertain any and all information of concern to my employment history, whether same is of record or not, and I release employers and other persons named herein from all liability for any damages on account of furnishing such information. I understand that, as an applicant for a position with this company, I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and drug test.

I further certify that I am a genuine applicant for employment and this application is being submitted solely for the purpose of seeking employment with the employer and for no other reason.

I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I also understand that misrepresentation or omission of information or facts may result in my rejection or dismissal.

If hired, I agree to abide by all the rules and policies of the employer.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

_____   _____
Applicant Signature   Date