

Soofter LLC Employment Application Form

Page 1: Personal Information and Contact Details

Personal Information

- Full Name:

- Date of Birth:

- Address:

- Phone Number:

- Email Address:

Legal Information

- Social Security Number (SSN):

(Confidential)

- Are you legally eligible to work in the United States?

- Yes

- No

- Have you ever been convicted of a felony?

- Yes

- No

- If yes, please explain:

Page 2: Position and Availability

Position Applied For

- Job Title:

- Department:

- Desired Salary:

- Date Available to Start:

Availability

- Are you available to work:
 - Full-time
 - Part-time
 - Weekends
 - Evenings
 - Do you have any commitments that might interfere with your availability?
- Yes
- No
 - If yes, please explain:

Page 3: Education and Training

Education

- Highest Level of Education Completed:

- Name of School/University:

- Major/Area of Study:

- Graduation Date:

Certifications and Training

- List any relevant certifications or training:

- Do you have any professional licenses?

- Yes

- No

- If yes, please specify:

Page 4: Employment History

Current/Most Recent Employer

- Company Name:

- Job Title:

- Dates of Employment:

From:

 To:

- Responsibilities:

- Reason for Leaving:

Previous Employment

- Company Name:

- Job Title:

- Dates of Employment:

From:

 To:

- Responsibilities:

- Reason for Leaving:

Additional Employment

- Add additional previous employment:

Page 5: Skills and Qualifications

Skills

- List any relevant skills you possess for the position applied for:
-

Technical Proficiency

- Rate your proficiency in the following areas: (1 = Beginner, 5 = Expert)

- Microsoft Office Suite:

1 2 3 4 5

- Project Management Software:

1 2 3 4 5

- Coding/Programming Languages (if applicable):

1 2 3 4 5

Other Qualifications

- Languages Spoken:
-

- Additional Qualifications:
-
-

Page 6: References

Professional References

Name:

1. Relationship:

Company:

Phone Number:

Email Address:

2. Name:

Relationship:

Company:

Phone Number:

Email Address:

3. Name:

Relationship:

Company:

Phone Number:

Email Address:

Page 7: Additional Information and Signature

Additional Information

- Why do you want to work for Sooffer LLC / Sooffer Rideshare Company?

- How did you hear about this position?

- Any additional information you would like to provide:

Signature

- I certify that the information provided in this application is true and complete.
(Check here)
- I authorize Sooffer LLC / Sooffer Rideshare Company to verify the information provided and conduct a background check.
(Check here)

- Signature:

- Date:
