

EMPLOYMENT / JOB APPLICATION – Scott’s First Aid Co.

PERSONAL INFORMATION

FULL NAME: _____ DATE: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
E-MAIL: _____ PHONE: _____
SOCIAL SECURITY NUMBER (SSN): ____-____-____
DATE AVAILABLE: _____ DESIRED PAY: _____ Hour Salary
POSITION APPLIED FOR: _____
EMPLOYMENT DESIRED: Full-time Part-time Seasonal

EMPLOYMENT ELIGIBILITY

Are you legally eligible to work in the U.S.? Yes No
Have you ever worked for this employer? Yes No
If yes, dates: _____
Have you ever been convicted of a felony? Yes No
If yes, explain: _____

EDUCATION

HIGH SCHOOL: _____ LOCATION: _____
FROM: _____ TO: _____ GRADUATE? Yes No DIPLOMA: _____
COLLEGE: _____ LOCATION: _____
FROM: _____ TO: _____ GRADUATE? Yes No DEGREE: _____
OTHER: _____ LOCATION: _____
FROM: _____ TO: _____ CERTIFICATION: _____

PREVIOUS EMPLOYMENT

EMPLOYER 1: _____
EMAIL: _____ PHONE: _____
ADDRESS: _____
START PAY: _____ Hour Salary END PAY: _____ Hour Salary
JOB TITLE: _____
RESPONSIBILITIES: _____
FROM: _____ TO: _____
REASON FOR LEAVING: _____
EMPLOYER 2: _____
EMAIL: _____ PHONE: _____
ADDRESS: _____
START PAY: _____ Hour Salary END PAY: _____ Hour Salary
JOB TITLE: _____
RESPONSIBILITIES: _____
FROM: _____ TO: _____
REASON FOR LEAVING: _____

EMPLOYER 3: _____
EMAIL: _____ PHONE: _____
ADDRESS: _____
START PAY: _____ Hour Salary END PAY: _____ Hour Salary
JOB TITLE: _____
RESPONSIBILITIES: _____
FROM: _____ TO: _____
REASON FOR LEAVING: _____

REFERENCES

REFERENCE 1: _____ RELATIONSHIP: _____
COMPANY: _____ TITLE: _____
EMAIL: _____ PHONE: _____
REFERENCE 2: _____ RELATIONSHIP: _____
COMPANY: _____ TITLE: _____
EMAIL: _____ PHONE: _____
REFERENCE 3: _____ RELATIONSHIP: _____
COMPANY: _____ TITLE: _____
EMAIL: _____ PHONE: _____

MILITARY SERVICE

Are you a veteran? Yes No
BRANCH: _____ RANK AT DISCHARGE: _____
FROM: _____ TO: _____
TYPE OF DISCHARGE: _____
If not honorable, explain: _____

BACKGROUND CHECK CONSENT

If asked, are you willing to consent to a background check and drug test?
 Yes No

DISCLAIMER

Applicant understands this is an Equal Opportunity Employer committed to diversity.
Please complete all sections, even if attaching a resume.
I certify that my answers are true and complete. If employed, false statements may
result in termination.
SIGNATURE: _____ DATE: _____
PRINT NAME: _____