## **Xtreme Staffing Inc.**

## **Employment Application**

		Applicant	Informa	ation			j
Full Name:						Date:	
	Last	First			<i>M.I.</i>		
Address:							
	Street Address					Apartment/Unit ‡	ŧ
	City				State	ZIP Code	
Mailing Add	ress if Different than S	treet Address: [] Check	box if ma	ailing a	ddress is the sam	e as street address	
Phone:			Email				
Other Aliase			Driver Li	cense \$	State: DL Nu	mber:	
						ferred	
Date Availa	ble:	Social Security No.:				nouns	
Position App	plied for:						
•		YES NO				YES	NO
Are you a ci	itizen of the United Sta		If no, a	re you	authorized to wor	k in the U.S.?	
Have you ever worked for this company?							
		Educ	cation				
High Schoo	l:	Address	:				
<b>F</b>	Tai		YES	NO	Dislama		
From:	To:	Did you graduate?	?		Diploma:		
College:		Address	:				
From:	То:	Did you graduate?	YES ?	NO □	Degree:		
					J		
Other:		Address					
From:	То:	Did you graduate?	YES		Degree:		
		Lice	enses				
License Ty	ре	Issue Date			Expiration Date		
	ре				•	9	
License Ty	pe	Issue Date			Expiration Date	)	

## Please list three professional references.

Full Name:		Relationship:
Company:		Phone:
Address:		
		Deletienskin
Full Name:		Relationship:
Company:	· · · · · · · · · · · · · · · · · · ·	Phone:
Address:		
Full Name:		Relationship:
Company:		Phone:
Address:		
	Previous Employment	
	Frevious Employment	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:\$	Ending Salary: <b>\$</b>
Responsibi	ities:	
From:	To: Reason for Leaving:	
	YES NO	
May we cor	ntact your previous supervisor for a reference?	
Company:		Phono:
		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:	Ending Salary: <mark>\$</mark>
Responsibi	ities:	
From:	To: Reason for Leaving:	
	YES NO	
May we cor	ntact your previous supervisor for a reference?	

Company:				Phone:	
A ddrooo.					
Job Title:	Starting Salary:			Ending Salary	:\$
Responsibilit	ties:				
From:	To:	Reason fo	or Leaving:		
May we cont	tact your previous supervisor for a reference?	YES			
	Military	Service			
Branch:			From:_		То:
Rank at Disc	charge:	Type of	Discharge:		
If other than	honorable, explain:				
	Disclaimer an	d Signat	ure		

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Candidate/ Employee Name (print):	Date:
Candidate/ Employee Name (signature):	