

DATE _____ DESIRED POSTION _____

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

NAME _____

EMAIL ADDRESS: _____

Address: _____

STREET

CITY

STATE

ZIP

PHONE NO. () _____ ARE YOU 18 YEARS OR OLDER? YES () NO ()

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? YES () NO ()

DATE YOU CAN START?

SALARY DESIRED?

ARE YOU EMPLOYED NOW?

IF SO, MAY WE INQUIRE
OF YOUR PRESENT EMPLOYER?

EDUCATION	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	Subjects Studied
HIGH SCHOOL				
COLLEGE/TRADE BUSINESS SCHOOL				

The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARING WITH LAST ONE FIRST.)

DATE MONTH & YEAR	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM: TO:				
FROM: TO:				
FROM: TO:				

Did you leave your job due to downsizing or layoff? YES or NO

REFERENCES: GIVE 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			

PHYSICAL RECORD:

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED? YES() NO ()
IF YES, WHAT CAN BE DONE TO ACCOMMODATE YOUR LIMITATIONS?

PLEASE DESCRIBE:

You will not be denied employment solely because of a criminal record, unless the offence is related to the job for which you have applied or there is a legitimate safety concern due to the nature of the employer's business.

Have you ever been convicted of a crime (which includes convictions, guilty plea or a plea of no contest to either felony or misdemeanors)? Yes No

Are there any felony charges pending against you? Yes No

If you answered yes to either of the above, list each criminal conviction and pending felony charge, including the date, location and facts surrounding each conviction or charge.

Availability:

Please give hours available on corresponding days. (Ex: AM, PM, All Day)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
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Hours looking to work a week?

IN CASE OF
EMERGENCY PLEASE NOTIFY:

NAME	Relationship	PHONE NO.
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I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE".

DATE _____

SIGNATURE