



EMPLOYMENT APPLICATION

We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, color, age, sex, religion, disability, or national origin.

APPLICANT INFORMATION																			
Last Name						First				M.I.		Date							
Street Address									Apartment/Unit #										
City						State				ZIP									
Phone (s)						E-mail Address													
Date Available				Last four digits of SSN		XXX – XX–		Desired Salary		\$									
Position Applied for																			
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>		NO <input type="checkbox"/>							
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?												
Are you employed now?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, may we contact your employer?			YES <input type="checkbox"/>		NO <input type="checkbox"/>							
Type of Employment												Full-time <input type="checkbox"/>		Part-time <input type="checkbox"/>		Summer <input type="checkbox"/>		Temporary <input type="checkbox"/>	
EDUCATION AND OFFICE SKILLS																			
High School						Address													
From			To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>										
College or Trade School						Address													
From			To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree								
Years of Typing Experience				Words Per Minute				Other Office Equipment Used		Printer <input type="checkbox"/> Copier <input type="checkbox"/> Fax <input type="checkbox"/> Scanner <input type="checkbox"/> Calculator <input type="checkbox"/>									
Computer Software and Hardware Experience																			
EMPLOYMENT HISTORY (LIST PRESENT OR MOST RECENT POSITIONS FIRST)																			
Company								Phone											
Address								Name and Position of Supervisor											
Job Title						Starting Salary		\$		Ending Salary		\$							
Responsibilities																			
From			To		Reason for Leaving														
May we contact your previous supervisor for a reference?							YES <input type="checkbox"/>		NO <input type="checkbox"/>										



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EMPLOYMENT HISTORY (CONTINUED)									
Company						Phone			
Address						Name and Position of Supervisor			
Job Title				Starting Salary		\$		Ending Salary \$	
Responsibilities									
From				To				Reason for Leaving	
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>		NO <input type="checkbox"/>			
Company						Phone			
Address						Name and Position of Supervisor			
Job Title				Starting Salary		\$		Ending Salary \$	
Responsibilities									
From				To				Reason for Leaving	
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>		NO <input type="checkbox"/>			
Company						Phone			
Address						Name and Position of Supervisor			
Job Title				Starting Salary		\$		Ending Salary \$	
Responsibilities									
From				To				Reason for Leaving	
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>		NO <input type="checkbox"/>			
MILITARY SERVICE									
Branch						From		To	
Rank at Discharge						Type of Discharge			
If other than honorable, explain									
Additional skills and or more about you:									



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DISCLAIMER AND SIGNATURE

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.

Signature		Date	
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References:

1. Professional
Name
Address
Phone () -
Email

2. Professional
Name
Address
Phone () -
Email

3. Professional
Name
Address
Phone () -
Email