

# Application for Employment

Position You Are Applying For \_\_\_\_\_ Desired Salary \_\_\_\_\_

Date Available for Work: \_\_\_\_\_

PERSONAL INFORMATION			
Last Name	First Name	Middle	
Address	City	State	Zip
Home Phone: _____		Cell Phone: _____	
Email address: _____			
Social Security Number: _____			
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If selected for employment are you willing to submit to a pre-employment drug screening test? <input type="checkbox"/> Yes <input type="checkbox"/> No			

EDUCATION				
School Name	Location	Years Attended	Degree Received	Major

Other training, certifications or licenses held: \_\_\_\_\_

EMPLOYMENT	
Employer: _____	Dates Employed: _____
Work Phone: _____	Pay Rate: \$ _____ to _____
Address: _____	
City: _____	State: _____ Zip: _____
Position: _____	
Duties Performed: _____	
Supervisors Name and Title: _____	
Reason for leaving: _____	
May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No	

EMPLOYMENT	
Employer: _____	Dates Employed: _____
Work Phone: _____	Pay Rate: \$ _____ to _____
Address: _____	
City: _____	State: _____ Zip: _____
Position: _____	
Duties Performed: _____	
Supervisors Name and Title: _____	
Reason for leaving: _____	
May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**EMPLOYMENT**

Employer:	_____	Dates Employed:	_____
Work Phone:	_____	Pay Rate: \$	_____ to _____
Address:	_____		
City:	_____	State:	_____ Zip: _____
Position:	_____		
Duties Performed:	_____		
Supervisors Name and Title:	_____		
Reason for leaving:	_____		
May we contact them?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

**REFERENCES**

Name	Title	Company	Phone

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

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date