

# APPLICATION FOR EMPLOYMENT

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

## PERSONAL INFORMATION

	Date	Social Security Number		Last
<b>Name</b>				
Last	First	Middle		
<b>Present Address</b>				
Street	City	State	Zip	
<b>Permanent Address</b>				
Street	City	State	Zip	
<b>Phone No.</b>				
<b>Referred By</b>		Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		

## EMPLOYMENT DESIRED

<b>Position</b>	<b>Date You Can Start</b>	<b>Salary Desired</b>	
Are You Employed Now? <input type="checkbox"/> Yes <input type="checkbox"/> No		If So May We Inquire of Your Present Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Ever Applied to this Company Before? <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Where?</b>	<b>When?</b>

## EDUCATION

Name and Location of School	Circle Last Year Completed	Did You Graduate?	Subjects Studied and Degree(s) Received
Grammar School		<input type="checkbox"/> Yes <input type="checkbox"/> No	
High School	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade, Business or Correspondence School	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

## GENERAL

Subjects of Special Study or Research Work

Job Related Skills (typing, driver's license, etc.)

Activities Other Than Religious (Civic, Athletic, etc.)

EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, SEX, COLOR OR NATIONAL ORIGIN OF ITS MEMBERS

(Continued on Other Side)

**FORMER EMPLOYERS:** List below your last four employers, starting with the last one first.

Date Month and Year	Name and Address of Employer			
From				
To				
From				
To				
From				
To				
From				
To				

**REFERENCES:** List below three persons not related to you, whom you have known at least one year.

1			
2			
3			

**IN CASE OF EMERGENCY, NOTIFY:** \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, at the discretion of the employer, be terminated at any time without any previous notice.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**APPLICANT - DO NOT WRITE BELOW THIS LINE**

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_

Neatness: \_\_\_\_\_

Ability: \_\_\_\_\_

Hired: \_\_\_\_\_ Dept: \_\_\_\_\_ Position: \_\_\_\_\_

Start Date: \_\_\_\_\_ Salary: \_\_\_\_\_

Approvals: \_\_\_\_\_

\_\_\_\_\_  
1. Employment Manager

\_\_\_\_\_  
2. Employment Head

\_\_\_\_\_  
3. General Manager