



## APPLICATION FOR EMPLOYMENT

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

### PERSONAL INFORMATION

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ SSN: \_\_\_\_\_

ARE YOU 18 YEARS OR OLDER? YES \_\_\_\_\_ NO \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

### EMPLOYMENT DESIRED

POSITION: \_\_\_\_\_ DATE YOU CAN START: \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_ CAN WE CONTACT YOUR EMPLOYER? \_\_\_\_\_

HAVE YOU EVER APPLIED WITH THIS COMPANY BEFORE? \_\_\_\_\_

EDUCATION	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
-----------	--------------------------------	-------------------	---------------------	---------------------

HIGH SCHOOL \_\_\_\_\_

COLLEGE \_\_\_\_\_

TRADE SCHOOL \_\_\_\_\_

### MILITARY BACKGROUND

BRANCH: \_\_\_\_\_ RANK: \_\_\_\_\_ JOB: \_\_\_\_\_



**FORMER EMPLOYERS:**

LIST BELOW YOUR LAST THREE EMPLOYERS, STARTING WITH THE LAST FIRST

DATE	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM:				
TO:				
FROM:				
TO:				
FROM:				
TO:				

**REFERENCES:**

GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

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 ANY AND 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 THE SAME TO YOU..

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

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

HIRED? YES \_\_\_\_\_ NO \_\_\_\_\_ POSITION: \_\_\_\_\_ DEPT 1 OR 2

\_\_\_\_\_  
\_\_\_\_\_