



INSTRUCTIONS: Please furnish complete and accurate information. Applications will be verified. Incomplete applications will not be considered. Please print clearly.

EMPLOYMENT DESIRED

Position Applying For	Date You Can Start	Salary Desired	Type of Employment
			Full-Time <input type="checkbox"/> Summer <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/>
Are you employed now? Yes <input type="checkbox"/> No <input type="checkbox"/>		If so, may we contact your present employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	

PERSONAL INFORMATION

 LAST NAME FIRST NAME M.I.

 ADDRESS (NUMBER AND STREET) CITY STATE ZIP CODE

 PHONE (AREA CODE AND NUMBER) CHECK IF UNDER 18 YRS OF AGE

Only U.S. Citizens or Aliens who verify legal authorization to work in the U.S. are eligible for employment. Are you a U.S. Citizen or are you otherwise authorized to work in the U.S.? Yes No

Have you ever been interviewed for employment by this company? Yes No If so, by whom _____

Were you ever employed by this company? Yes No From _____ To _____ Position _____

Reason for leaving _____

List any friends or relatives working for us or who have worked for us _____

Are you willing to work overtime as required? Yes No

How did you come to apply for employment with us?			
<input type="checkbox"/> Walk In	<input type="checkbox"/> Private Employment	<input type="checkbox"/> Mail	<input type="checkbox"/> Classified Ad
<input type="checkbox"/> Employee Referral	<input type="checkbox"/> State Employment Agency	<input type="checkbox"/> School or Organization	<input type="checkbox"/> Other _____

Have you ever been convicted of a crime (example; Felony), exclude misdemeanors and summary offenses; which has not been annulled, expunged or sealed by a court? Yes No

If you answered yes to the above question, describe in full (include date, offense, and disposition):

(NOTE: Conviction or pending felony charges will not necessarily disqualify an applicant.)

WORK EXPERIENCE

Start with present or most recent position. Please attach resume if available.

COMPANY NAME		TYPE OF BUSINESS	
ADDRESS	CITY	STATE	TELEPHONE
EMPLOYED FROM	TO	JOB TITLE	IMMEDIATE SUPERVISOR
BASE STARTING SALARY	BASE SALARY LEAVING	ADDITIONAL COMPENSATION	EXPLAIN ADDL. COMPENSATION
DUTIES			
REASON FOR LEAVING			

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EMPLOYED FROM	TO	JOB TITLE	IMMEDIATE SUPERVISOR
BASE STARTING SALARY	BASE SALARY LEAVING	ADDITIONAL COMPENSATION	EXPLAIN ADDL. COMPENSATION
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HIGH SCHOOL / G.E.D.

_____	Graduated: Yes <input type="checkbox"/> No <input type="checkbox"/>
NAME	
_____	_____ G.E.D.: Yes <input type="checkbox"/> No <input type="checkbox"/>
CITY	STATE

COLLEGE / UNIVERSITY

_____	Graduated: Yes <input type="checkbox"/> No <input type="checkbox"/>
NAME	
_____	_____
CITY	STATE
_____	If no degree, credits earned: _____
TYPE OF DEGREE	
_____	_____
MAJOR	MINOR

POST GRADUATE STUDIES

_____	Graduated: Yes <input type="checkbox"/> No <input type="checkbox"/>
NAME	
_____	_____
CITY	STATE
_____	If no degree, credits earned: _____
TYPE OF DEGREE	
_____	_____
MAJOR	MINOR

TECHNICAL / OTHER

_____	Graduated: Yes <input type="checkbox"/> No <input type="checkbox"/>
NAME	
_____	_____
CITY	STATE
_____	If no degree, credits earned: _____
TYPE OF DEGREE	
_____	_____
MAJOR	MINOR

OTHER TRAINING- List other training, qualifications and skills as drafting, apprenticeship, typing, computer (be specific when identifying computer skills), tools, equipment, instruments, and machinery you can operate.

ACTIVITIES AND ACHIEVEMENTS - List position(s) held and length of time. (Do not include those which indicate race, color, religion, sex, age, national origin, disability or veteran status.)
