

APPLICATION FOR EMPLOYMENT

Last name	First	МІ	Position desired		Date of application
Street address			Email address		Social Security number
City	State	ZIP	Home telephone	Cell telephone	Work telephone

Please read carefully and complete by printing in ink or typing.

An Equal Opportunity Employer: We are an equal opportunity employer, and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.

Employment Record

Starting with present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Last or present company		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Base salary (optional)	Dates worked From	То	
Reason for leaving			
Company Name		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Base salary (optional)	Dates worked From	То	
Reason for leaving			
Company Name		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Base salary (optional)	Dates worked From	То	
Reason for leaving			
Company Name		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Base salary (optional)	Dates worked From	То	
Reason for leaving	J		

Educational History

School name	Location	Major course or subject	Dates attended		Graduated		Degree
	(city, state)		(From	To)	(Yes	No)	
High school					•		
Technical/trade (after high school)							
College (list all attended)							
Other education/training							

Outside Activities

(Exclude those indicating race, color, religion, sex, national origin, age, or handicap.)

Professional memberships, certificates, or licenses held

Past and present civic or cultural activities — include offices held

Principal hobbies

Special Skills

To be completed by applicant for office/clerical work		
Typing Yes Words per minute:	Type of machines operated	Years experience
No		
Dictation Yes Words per minute:		
No		
Computer skills Hardware		
Software		
Please list other skills and/or equipment/language experience you have acquired	List other skills	
	Served apprenticeship Yes Type:	
	Νο	

Military Record				
Branch of service			From	То
Present military affiliation None Re Kinds of training and duty	serve (active)	Reserve (inactive)		
Professional/Work Refere List two past supervisors you are applying.		re not related to you, who have knowledge o	of your qualifications for	the position for which
Name	Title/relationship	Address (street, city, state, ZIP code)	Phone no. (include area code)	Occupation
		(Sueer, City, State, Zir Coue)	(Include area code)	
May we contact your pres	ent employer?	Yes No		
Wage or salary required				
Date available				
Name and Address of per	son to be notified in cas	e accident or emergency:		
Are you eligible to work in	the United States?	/es 🗌 No		
Offers of employment will l	be subject to a backgrou	nd check, which may include criminal history	records.	
accepting a job offer. This	is done to ensure that in	olutions, Inc. to verify employment related ndividuals who join the firm's workforce are ions. The extent of the inquiry will depend or	well qualified and have a	strong potential to be

- Verification/Reference from current and past employers
- Criminal background check (a conviction for a crime is not an automatic bar to employment)
- Confirmation of necessary licenses, certificates and degrees.

I hereby certify that the answers and other information on this application are true and correct and that I understand any misrepresentation or omission of facts on my part will be justification for separation from the company's service, if employed. I understand that my employment may be contingent upon receipt of an alien registration number, verification of birth, and any other pertinent information bearing upon my employment, and that my continued employment depends upon the will of the company or myself.

Date

Signature

If any of your educational or employment records are under other than the above name, please provide other names.