Application Number

PRE-EMPLOYMENT APPLICATION

Our Company is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status, any disability as defined in the Americans with Disabilities Act, or for any other reason protected by State or Federal law.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered.

PERSONAL				Dat	e//
Name	LAST	FIRST	MIDDLE	Home Phone (_)
Present Address_					
	NO.	STREET	CITY	STATE	ZIP
Are you 18 years	of age or older?	Yes 🗖 No			
Are you a citizen o	of the U.S. or do you	have the legal right to be e	mployed in the United	States? 🗖 Yes 🛛 N	0
	onvicted of any crime drugs? 🗍 Yes 🗌	within the last 10 years (e No (NOTE: A convic		violations) including drivin y disqualify you from emp	
If Yes, sta	te the offense, locatic	n, date and disposition			
		etts applicants may omit conviction icants may omit records of convic			
		t reasonable accommodation	ons, to work overtime	or to travel if travel and/o	r overtime are re-
lf no, pleas	se explain				
Would you be willi	ing and able to reloca	ite? 🗖 Yes 🔲 No			
Drivers License: S	State	Туре	Currently Valid?	🗋 Yes 🔲 No	
EMPLOYMENT D	DESIRED				
Are you seeking	🗖 full-time	part-time	temporary or set	ummer employment?	
Position applied for	or	Salary Desired_			
Date Available to	start				
Have you ever ap	plied to our company	before? 🗍 Yes 🛛 No			
Have you ever wo	orked for our company	/ before? 🔲 Yes 🛛 No)		
If your ans	swer to either of the a	bove questions is Yes, stat	e when and where you	applied and/or worked.	
How did you learn	n of our company and	/or position?			
Are you now, or d	o you expect to be, w	orking in any other busines	ss or job? 🗖 Yes [No	
Are there any day	s or hours you would	be unable or unwilling to w	vork? 🗖 Yes 🔲 N	o If Yes, please sp	pecify those days
or hours y	ou are unable or unw	illing to work?			
Is there any type of	of work which you will	not perform? 🗖 Yes	No		
If Yes, plea	ase explain				

EDUCATION Name Address and Location		Graduate?	Courses Studied	
High School	Circle highest grade completed	T Yes		
	9 10 11 12	□ No	Diploma:	
College	Circle number of years completed	T Yes	Major:	
	1 2 3 4 4+	D No	Minor: Degree(s):	
Trade School	Number of months attended	Yes No	Diploma or Certificate:	
If you did not graduate, why did you leave high school or colleg	je?	1		
Are you planning to pursue further studies?	If so, when and			
List any scholastic honors, offices held and activities involved may reflect race, sex, color, religion, national origin, disability, s				
Please describe any other special courses, seminars or traini are applying.	•	ible you to p	erform the position for which you	
MILITARY				
Have you ever served in the military? Yes No				
Service Branch	Final Rank			
What duties, training or experience did you have while in the m				
CAPABILITY / RELIABILITY				
Would you be willing and able to perform all of the tasks requir	ed by the job you are	e applying for	r? 🔲 Yes 🔲 No	
If not, explain which tasks				
Have you filed any type of fraudulent claim against any of your	present or past emp	oloyers?	Yes 🗖 No	
If Yes, please explain				
Will you abide by the safety rules of this company?	🗖 No			
Have you ever been disciplined for violating company safety ru	lles or regulations?	🗖 Yes 🗌	No	
If Yes, please explain				
How many days of work (or school) have you missed in the las	t 2 years?			
How many times have you been late for work (or school) in the	a last 2 years?			
Consistent attendance and punctuality are essential requirements of every job in our company. Would you be willing and able to report to work on time every day on a regular and consistent basis? Tyes No If No, please explain				
Have you ever been disciplined or received verbal or written was lf Yes, please explain	arnings for absentee			
		·	-1-1-	
Have you ever been fired, or asked to resign from a job?	′es 🗖 No If Y	es, please e	xplain	

WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

PLEASE GIVE MONTH AND YEAR

DO NOT REFERENCE YOUR RESUME

		Name and Title of Last	Dates Employed		Pay
Address City, State, Zip Code		Supervisor	From:	To:	Starting
			Mo	Mo	\$
Telephone Area Code ()	Nature of Business				Ending
			Year	Year	\$
Title		Reason for Leaving			
Describe duties performed, skills used/learned, advancements/promotions earned:					

		Name and Title of Last	Dates Employed		Pay
Address City, State, Zip Code		Supervisor	From:	To:	Starting
			Mo	Mo	\$
Telephone Area Code())	Nature of Business				Ending
			Year	Year	\$
Title		Reason for Leaving			
		Reason for Leaving			
Describe duties performed, skills used/learned, advancements/promotions earned:					

Name of Employer		Name and Title of Last	Dates Employed		Pay
Address City, State, Zip Code		Supervisor	From:	To:	Starting
	1		Mo	Mo	\$
Telephone Area Code()	Nature of Business				Ending
			Year	Year	\$
Title		Reason for Leaving			
Describe duties performed, skills used/learned,	advancements/promotions earned:				

		Name and Title of Last	Dates Employed		Pay
Address City, State, Zip Code		Supervisor	From:	To:	Starting
			Mo	Mo	\$
Telephone Area Code ()	Nature of Business				Ending
			Year	Year	\$
Title		Reason for Leaving	<u> </u>		
Describe duties performed, skills used/learned, advancements/promotions earned:					

If you worked in any of your previous positions under and	other name, please indica	te below: (For reference che	ecking purpo	oses)
Name @ Company	Name	@ Company		
Are you presently employed? 🗍 Yes 🛛 No	If Yes, may we con	tact your present employer?	🗖 Yes	🗖 No
Please list all periods of time since high school or college	e during which you were r	not employed		
How did you spend this time?				
s	SPECIAL SKILLS			
What languages do you speak fluently?				
Do you type? 🗖 Yes 🔲 No Words per minute				
Please list all software programs in which you are profici	ent, indicating how many	years work experience you h	nave with ea	ach:
List other computer skills, programming languages, or co	omputer training you have	had:		
List any other technical training, skills or work experience	e which may qualify you f	or a job with us:		
	e which may quality your			
Use this space below to describe why you are interested you feel particularly qualify you for a position with us. If y				hich

Name	Address	Phone	Occupation

AFFIDAVIT

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge. I hereby authorize the Company to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements. I agree that, if I am employed, I will abide by all the rules and regulations of the Company. I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody in the Company is authorized to enter into any written or verbal employment contracts with me for any definite period of time without the express written consent of the President of the Company. I also understand that my employment is "at-will" and may be terminated by myself or by the company at any time for any reason or no reason at all, with or without prior notice.					
Signature	Date/				
COMPANY	USE ONLY				
Interviewed by:					
Interviewers remarks:					
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Is the operation of a company vehicle a job requirement? If yes to above, has a request for driver's license records been made? Yes Yes No