

# APPLICATION FOR EMPLOYMENT

Date \_\_\_\_\_

Directions: Type or print in *blue or black ink*. Answer all questions which are applicable. Please do not state "See Resume".

## PERSONAL INFORMATION

Last Name	First Name	Middle
Address	City	State   Zip
Phone	Day Phone (if Different)	Social Security Number
Fax Number	E-Mail Address	

## EMPLOYMENT INFORMATION

Position for which you are applying \_\_\_\_\_

Are you employed at the present time? \_\_\_\_\_ If yes, please complete the information below

Employer's Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_

- How long have you been with this employer? \_\_\_\_\_ Present Salary: \_\_\_\_\_
- If offered a position, when can you report for work? \_\_\_\_\_
- If hired can you show proof of your legal right to work in the U.S.? Yes \_\_\_ No \_\_\_
- Have you ever been dismissed, or asked to resign from any position? Yes \_\_\_ No \_\_\_
- Have you ever been convicted of a felony, or a misdemeanor which resulted in imprisonment? A yes answer to the above question does not necessarily disqualify an applicant from employment. Yes \_\_\_ No \_\_\_

If yes to number 4 or 5, please explain: \_\_\_\_\_

\_\_\_\_\_

## EDUCATION

Please list on the following lines all schools attended and any other pertinent information about your education.

School(s)	Subjects Studied (if applicable)
High School	
College (Including dates attended)	

**EMPLOYMENT EXPERIENCE (List most recent experience first)**

Name & Address	Position(s) Held	Dates (Start - End)

**REFERENCES**

Name & Address (Include City, State, Zip)	Phone	Relationship

**The following section is to be completed by applicant for an OFFICE POSITION:**

Can you type? \_\_\_\_\_ How many words per minute? \_\_\_\_\_

Computer Skills      Macintosh \_\_\_\_\_      PC \_\_\_\_\_

Please provide computer and software knowledge below:


**I certify that all statements made herein and on the enclosed resume are true and correct to the best of my knowledge. I authorize investigation of all statements herein recorded. I release from liability all persons and organizations reporting information required by this application.**

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*