**Employment Application Form**



***Please print all information requested except for signature***

**Application for Employment**

**Applicants may be tested for illegal drugs**

 Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle Maiden

Present address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Number Street City State Zip

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security No. \_\_\_\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_\_

Telephone ( )­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If under 18, list age \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position applied for (1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Days/hours available to work***

and salary desired (2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No preference \_\_\_\_\_ Thursday \_\_\_\_\_\_\_\_

(Be specific) Monday \_\_\_\_\_\_\_\_\_\_ Friday \_\_\_\_\_\_\_\_\_\_

 Tuesday \_\_\_\_\_\_\_\_\_ Saturday \_\_\_\_\_\_\_\_

 Wednesday \_\_\_\_\_\_\_ Sunday \_\_\_\_\_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Can you work nights? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment desired: [ ] FULL-TIME ONLY [ ] PART-TIME ONLY [ ] FULL OR PART-TIME

When available for work? \_\_\_\_\_\_\_\_\_\_\_\_\_ Please list any days in the next 3 months when you are unavailable to work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person to be notified in case of emergency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| TYPE OF SCHOOL | NAME OF SCHOOL | LOCATION (COMPLETE MAILING ADDRESS | NUMBER OF YEARS COMPLETED | MAJOR DEGREE |
| High School |  |  |  |  |
| College |  |  |  |  |
| Business or Trade School |  |  |  |  |
| Professional School |  |  |  |  |

Have you ever been convicted of a crime? [ ] No [ ] Yes

If yes, explain number of conviction(s), nature of offense(s), leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What skills/experience do you bring to us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

What is your definition of excellent customer service? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Application for Employment**

**WORK EXPERIENCE** Please list your work experience for the past five years beginning with your most recent job held. If you were self employed, give buisiness name. Attach additional sheets if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| Name of employerAddressCity, State, ZipPhone number | Name of last supervisor | Employment dates | Pay or salary |
|  | From:To: | Start:Final: |
| Your last job title: |
| Reason for leaving (be specific: |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company: |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of employerAddressCity, State, ZipPhone number | Name of last supervisor | Employment dates | Pay or salary |
|  | From:To: | Start:Final: |
| Your last job title: |
| Reason for leaving (be specific: |
| List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company: |

May we contact your present employer? [ ] Yes [ ] No

Did you complete this application yourself? [ ] Yes [ ] No

If not, who did? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a current drivers license? [ ] Yes [ ] No

Please list two references other than relatives or previous employers:

1. 2.

|  |  |
| --- | --- |
| Name: | Name: |
| Position: | Position: |
| Company:  | Company: |
| Address: | Address: |
| Phone: | Phone: |