

# APPLICATION FOR EMPLOYMENT

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion or national origin. Public Law 90-202 prohibits discrimination because of age.

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## PERSONAL INFORMATION

DATE \_\_\_\_\_

NAME \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_

PHONE No. \_\_\_\_\_ ARE YOU ELIGIBLE TO LEGALLY

WORK IN THE U.S.? \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ ARE YOU OVER THE AGE OF 18? \_\_\_\_\_

ARE YOU RELATED TO ANYONE THAT IS CURRENTLY WORKING HERE OR HAS WORKED HERE PREVIOUSLY? \_\_\_\_\_ REFERRED BY \_\_\_\_\_

## EMPLOYMENT DESIRED

POSITION \_\_\_\_\_ DATE YOU CAN START \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_ IF SO MAY WE CONTACT YOUR PRESENT EMPLOYER? \_\_\_\_\_

EVER APPLIED HERE BEFORE? \_\_\_\_\_

DAYS AND HOURS AVAILABLE TO WORK:

NO PREF. \_\_\_\_\_ THURSDAY \_\_\_\_\_ FULL-TIME ONLY

MONDAY \_\_\_\_\_ FRIDAY \_\_\_\_\_ PART-TIME ONLY

TUESDAY \_\_\_\_\_ SATURDAY \_\_\_\_\_ FULL- OR PART-TIME

WEDNESDAY \_\_\_\_\_ SUNDAY \_\_\_\_\_

EDUCATION	NAME OF SCHOOL	LOCATION	YEARS ATTENDED	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE/BUSINESS SCHOOL				

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK \_\_\_\_\_

WHAT FOREIGN LANGUAGES DO YOU SPEAK FLUENTLY? \_\_\_\_\_

U.S. MILITARY OR NAVAL SERVICE \_\_\_\_\_ RANK \_\_\_\_\_ PRESENT MEMBERSHIP IN NATIONAL GUARD OF RESERVES \_\_\_\_\_

OTHER ACTIVITIES (CIVIC, ATHLETIC, FRATERNAL, ETC.) \_\_\_\_\_

**FORMER EMPLOYERS OR VOLUNTEER WORK**  
(LIST BELOW LAST FOUR EMPLOYERS STARTING WITH LAST ONE FIRST)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM TO				
FROM TO				
FROM TO				
FROM TO				

**REFERENCES:** GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU.

NAME	TELEPHONE #	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

**CRIMINAL RECORD:**

WITHIN THE PAST FIVE YEARS, HAVE YOU BEEN CONVICTED OF A FELONY, OR WITHIN THE PAST TWO YEARS, OF A MISDEMEANOR, OR ARE YOU PRESENTLY FORMALLY CHARGED WITH A CRIMINAL OFFENSE? \_\_\_\_\_

WITHIN THE PAST THREE YEARS, HAVE YOU EVER KNOWINGLY TAKEN NARCOTICS, AMPHETAMINES, OR BARBITURATES, OTHER THAN THOSE PRESCRIBED TO YOU BY A PHYSICIAN? \_\_\_\_\_

(IF YES TO EITHER QUESTION, PLEASE EXPLAIN)

\_\_\_\_\_

IN CASE OF EMERGENCY  
NOTIFY \_\_\_\_\_

NAME

ADDRESS

PHONE NO.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

INTERVIEWED BY \_\_\_\_\_ DATE \_\_\_\_\_

REMARKS \_\_\_\_\_

\_\_\_\_\_

NEATNESS		CHARACTER	
PERSONALITY		ABILITY	

HIRED \_\_\_\_\_ POSITION \_\_\_\_\_ START DATE \_\_\_\_\_ SALARY \_\_\_\_\_