



Office Use Only	
Full Time _____	Part Time _____
Date Hired ____/____/____	
Pay Rate	\$ _____
Dept. _____	
_____ Interviewer Initial	
Employee # _____	

THIS COMPANY IS AN EQUAL OPPORTUNITY EMPLOYER. WE DO NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, GENDER, AGE, OR DISABILITY.

NAME _____
 (Last) (First) (Middle Initial)

ADDRESS _____
 (Number and Street) (City) (State) (Zip Code)

SSN# _____ PHONE NO _____ CELL PHONE _____

EMAIL: _____

POSITION DESIRED _____ Best time to call _____
 Full Time

DATE YOU CAN START ____/____/____ Part Time (Circle One)
 Temporary

EXPECTED PAY \$ _____

HAVE YOU WORKED FOR THIS COMPANY BEFORE? Yes No If so, when? _____

IF YOU ARE A MINOR UNDER AGE OF 16, DO YOU HAVE A WORK PERMIT? Yes No

EDUCATION			
	NAME AND ADDRESS OF SCHOOL	MAJOR	DEGREE/ DIPLOMA
High School	_____	_____	_____
College	_____	_____	_____
	_____	_____	_____
Trade, business, other	_____	_____	_____
	_____	_____	_____

EMPLOYMENT HISTORY

Start with present or last position

Employer: _____

Address: _____

Supervisor: _____ Phone: _____

Position: _____ Date: _____
(Start Date) (End Date)

Duties: _____

Salary: _____ (Beginning) _____ (Ending)

Reason for leaving: _____

Employer: _____

Address: _____

Supervisor: _____ Phone: _____

Position: _____ Date: _____
(Start Date) (End Date)

Duties: _____

Salary: _____ (Beginning) _____ (Ending)

Reason for leaving: _____

Employer: _____

Address: _____

Supervisor: _____ Phone: _____

Position: _____ Date: _____
(Start Date) (End Date)

Duties: _____

Salary: _____ (Beginning) _____ (Ending)

Reason for leaving: _____

SPECIAL SKILLS AND QUALIFICATIONS: List job-related licenses, skills, training, honors, awards, and special accomplishments.

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO
(Circle One)

REFERENCES:

	Name/Title	Address and Phone No.	Occupation
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

SCHEDULE AVAILABILITY

DAYS AVAILABLE TO WORK:							
Days	MON	TUE	WED	THURS	FRI	SAT	SUN
Hours	_____	_____	_____	_____	_____	_____	_____
DAYS NOT AVAILABLE TO WORK:							
Days	MON	TUE	WED	THURS	FRI	SAT	SUN
Hours	_____	_____	_____	_____	_____	_____	_____

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT ANY FALSE INFORMATION ON THIS APPLICATION MAY BE GROUNDS FOR NOT HIRING ME.

SIGNATURE

_____/_____/_____
DATE