

# Application For Employment

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

## Personal Information:

Date \_\_\_\_\_

Name

Last

First

Middle

Current Address

Street

City

State

Zip

Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Are you legally eligible for employment in the United States?  Yes  No

## Employment Desired:

Position: \_\_\_\_\_ Date available to begin: \_\_\_\_\_

Full Time? \_\_\_\_\_ Part Time? \_\_\_\_\_ Wage Desired? \_\_\_\_\_

Have you ever been employed here before?  Yes Dates: \_\_\_\_\_  No

Are you able to perform the essential functions of the job you for which you are applying (with or without reasonable accommodation)? *Please do not provide any information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.*  Yes  No

Referred by: \_\_\_\_\_

## Educational Background:

Education	Name and Location of School	Number of Years Attended	Did You Graduate?	Subjects Studied
High School				
College				
Vocational Training-Other				

List any special training or skills, including languages, machine operation, etc., that would be of benefit in the job for which you are applying. \_\_\_\_\_

## U.S. Armed Forces Service (if applicable):

Branch \_\_\_\_\_ Dates of Service \_\_\_\_\_ To \_\_\_\_\_

Highest Rank Attained: \_\_\_\_\_

Veteran's Preference Claimed?  Yes  No Initial and Date: \_\_\_\_\_

*\*If Veterans Preference is claimed, a copy of the Department of Defense Form 214 must be submitted with this application.*

**Employment History:**

Dates (Month and Year)	Name and Address of Employer	Salary	Position	Reason for Leaving
From _____				
To				
From _____				
To				
From _____				
To				

**References: Give the name of three persons not related to you, whom you have known at least one year.**

Name	Phone Number	Business	Years Acquainted
1.			
2.			
3.			

**In case of emergency notify:** \_\_\_\_\_

Name

Address

Phone #

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president, and then only when in wrong and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary or forgoing."

Date

Signature