

Application For Employment

Pre-Employment Questionnaire. Equal Opportunity Employer.

PERSONAL INFORMATION

Name (Last Name First)		Social Security Number
Address	City	Zip
Permanent Address (if different)		
Phone No.	Referred By	

EMPLOYMENT DESIRED

Position	Salary Desired	<input type="checkbox"/> Full time <input type="checkbox"/> Part time
Have you ever applied to this organization before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?
Have you ever been employed by this organization before? <input type="checkbox"/> Yes <input type="checkbox"/> No		When?
If you are the applicant we choose for the position, what date can you start?		

Are there any other work experiences, skills or qualifications that you feel would especially fit you for this position?
Please add any additional skills you think are important for us to consider.

PERSONAL REFERENCES (not former employees/relatives)

1. Name	Occupation	Number
2. Name	Occupation	Number
3. Name	Occupation	Number

EDUCATION HISTORY

	Years attended	Degree	Subjects studied
High School			
College			
Trade, Business or Correspondence School			

Application For Employment (continued)

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WORK HISTORY (begin with most recent, list all past employers)

Name of company	Business phone
Type of business	Immediate supervisor
Your job title	Dates employed
Earnings at hire	Earnings at termination
Reason for termination	

Description of duties

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Type of business	Immediate supervisor
Your job title	Dates employed
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Description of duties

I certify that the answers given by me to the forgoing questions and statements are true and correct without consequential omissions of any kind whatsoever. I agree that the company shall not be liable in any respect if my employment is terminated because of falsity of statements, answers, or omissions made by me in this questionnaire. I also authorize the companies, schools, or persons above to give any information regarding my employment, character, and qualifications. I hereby release said companies, schools, or persons from all liability for any damage for issuing this information. I understand that there is not express or implied contract of employment and that if employed I have been hired at the will of the employer and that employment may be terminated at will, at any time; and with or without cause the employers only obligation being to pay salary or wages due and owing at the time of termination. Finally I understand that all company property must be returned and my indebtedness to the company must be paid before my termination. I authorize the company to deduct from the final paycheck(s) all monies due and owing to the company.

Signature

Date