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## APPLICANT REPRESENTATION

I understand that if employed: 1) any misrepresentation or omission of facts requested in this application is cause for dismissal; and 2) my employment is for no definite period and I may, regardless of the date of payment of my wages or salary, be terminated at any time without prior notice.

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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## PERSONAL INFORMATION

NAME

LAST

FIRST

MIDDLE

PRESENT ADDRESS

STREET

CITY

STATE

ZIP

PERMANENT ADDRESS

STREET

CITY

STATE

ZIP

PHONE NO.

EMAIL ADDRESS

REFERRED BY

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## EMPLOYMENT DESIRED

POSITION

DATE YOU CAN START

SALARY DESIRED

ARE YOU EMPLOYED NOW?

IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?

EVER APPLIED TO THIS COMPANY BEFORE?

IF SO, DATE

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## EDUCATION

INSTITUTION	NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	GRAD- UATED	SUBJECT STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

SUBJECT OF SPECIAL STUDY OR RESEARCH WORK

U.S. MILITARY SERVICE?

(LIST BRANCH IF YES)

PRESENT MEMBERSHIP IN

NATIONAL GUARD OR RESERVES?

LAST RANK

IF DISCHARGED

ACTIVITIES OTHER THAN RELIGIOUS (CIVIC,  
ATHLETIC, FRATERNAL, ETC.)

INDICATE TYPE

EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES RACE, CREED, COLOR OR NATIONAL ORIGIN OF ITS MEMBERS

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**FORMER EMPLOYERS** (List below your past four employers, starting with last one first)

DATES OF EMPLOYMENT (MONTH & YEAR)	EMPLOYER NAME, PHONE NUMBER AND SUPERVISOR POINT OF CONTACT	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

**REFERENCES:** Provide personal references (prior supervisors acceptable) with firsthand knowledge of your work ethic and character

NAME	CELL PHONE NUMBER	BUSINESS	YEARS KNOWN

By submitting this application, I hereby authorize and request any and all of my former employers and any other person, firm or corporation to furnish any and all information concerning my credit- worthiness and personal background and I hereby release each such employer or other person, firm or corporation from any and all liability by reason of furnishing the requested information.

<b>FOR OFFICE USE ONLY</b>	<b>INTERVIEWER:</b>	<b>DATE:</b>	<b>TIME:</b>
<u><b>Appearance:</b></u>		<u><b>Character:</b></u>	
<u><b>Personality</b></u>		<u><b>Ability</b></u>	
<b>Hire Date:</b>	<b>Dept:</b>	<b>Amount of Pay:</b>	