

APPLICATION FOR EMPLOYMENT

Date _____

Name _____
Last First Middle

Address _____
Street City State Zip

Phone Number _____ Cell Number _____
Are you related to any one in Referred
our employ: by: _____

EMPLOYMENT DESIRED

POSITION _____ Date you
can start _____

Are you employed now? _____ If so may we inquire of
your employer? _____

Have you filed an application here before? Yes No Date _____

If employed and you are under 18, can you furnish
a work permit? Yes No _____

Proof of citizenship or immigration status may be required upon
employment. _____

Do you have a valid driver's license? Yes No _____

EDUCATION Name & Location Years Date Subjects
of School Attended Graduated Studied

High School _____

College _____

Graduate/ _____

Professional School _____

Subjects of Special Study or Research Work

What languages do you speak fluently? Read Write

U. S. Military or Present Membership in National
Naval Service Rank Guard or Reserves

Volunteer Firefighter Yes No _____

EMPLOYMENT EXPERIENCE (starting with most recent employer)

<u>Date</u> <u>Month and Year</u>	<u>Name and address of</u> <u>Employer</u>	<u>Position</u>	<u>Reason for</u> <u>leaving</u>
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From _____

To _____

From _____

To _____

From _____

To _____

PROFESSIONAL REFERENCES: Give below the names of three persons not related to you, whom you have known at least one year.

<u>Name</u>	<u>Business</u> <u>Address</u>	<u>Business</u> <u>Phone#</u>	<u>Year acquainted</u>
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1. _____

2. _____

3. _____

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.

Date _____ Signature _____

DO NOT WRITE BELOW THIS LINE

Interviewed by _____ Date _____

REMARKS:

<u>Hired</u>	<u>Position</u>	<u>Report Date</u>
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Salary _____

Approved 1. _____

2. _____