

APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE
AN EQUAL OPPORTUNITY EMPLOYER

PLEASE PRINT

Name (Last, First, Middle)				
Present Address	Apt No	City	State	Zip
Permanent Address (if different)	Apt No	City	State	Zip
Cell Phone ()	Home Telephone ()		E-Mail Address:	

EMPLOYMENT DESIRED

Position applying for:							
How were you referred to this company?		Employment Agency	Friend*				
Walk-in	Newspaper Adv.	Relative*	Other*				
* Referral Source Name _____							
Are you applying for:							
Regular full-time work?	Yes	No					
Regular part-time work?	Yes	No					
Temporary or Casual work?	Yes	No					
What days and hours are you available for work? <small>(enter hours available below each day of the week)</small>							
Day:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Hours:							
Are you available for work on weekends and holidays?	Yes		No				
Would you be available to work overtime, if necessary?	Yes		No				
If hired, on what date can you start work?							
Salary desired:	\$		Per				

PERSONAL INFORMATION

Have you ever applied to or worked for this company before?	Yes	No
If yes, When? _____		
Do you have any friends or relatives working for this company?	Yes	No
If yes, state name(s) and relationship _____		
Why are you applying for work at this company? _____		
If hired, do you have a reliable means of transportation to and from work?	Yes	No
May we contact your current employer?	Yes	No
Are you at least 18 years old?	Yes	No
<i>(If under 18, hire is subject to verification that you are of minimum legal age).</i>		
If hired, can you present evidence of your U. S citizenship or proof of your legal right to live and work in this country?	Yes	No
Are you able to perform the essential functions of the job for which you are applying?	Yes	No
If no, describe the functions that cannot be performed _____		
<small>(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, skill and agility tests).</small>		

APPLICATION FOR EMPLOYMENT - PAGE 2 OF 4

EDUCATION, TRAINING AND EXPERIENCE

School	Name and Address	No. of Years Completed	Did You Graduate	Degree or Diploma
High School				
College University				
Business/Vocational				
Other				

Do you speak, write or understand any foreign languages? Yes No
 If yes, which languages? _____
 Do you have any other experience, training, qualifications or skills which you feel make you especially suited for work with our company? If so, please explain: _____

ANSWER THE FOLLOWING IF APPLICABLE TO THE POSITION APPLYING FOR

Are you licensed/certified for the job applied for?	Yes	No
Name of license/certification: _____		
Issuing State: _____ Expiration Date: _____		
License/certification number: _____		
Has your license/certification ever been revoked or suspended?	Yes	No
If yes, state reason(s), date of revocation or suspension and date of reinstatement: _____		

EMPLOYMENT HISTORY

List below all present and past employment starting with your most recent employer. Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of Employer: _____
Address: _____
Telephone Number: (____) _____ Supervisor's Name: _____
Your Position and Duties: _____
Dates of Employment From: _____ To: _____
Reason for Leaving: _____

Name of Employer: _____
Address: _____
Telephone Number: (____) _____ Supervisor's Name: _____
Your Position and Duties: _____
Dates of Employment From: _____ To: _____
Reason for Leaving: _____

APPLICATION FOR EMPLOYMENT - PAGE 3 OF 4

EMPLOYMENT HISTORY - continued	
Name of Employer: _____	
Address: _____	
Telephone Number: (____) _____	Supervisor's Name: _____
Your Position and Duties: _____	

Dates of Employment From: _____	To: _____
Reason for Leaving: _____	

MILITARY SERVICE

Have you obtained any special skills or abilities as the result of service in the military?		
	Yes	No
If so, describe: _____		

REFERENCES

List below three persons not related to you who have knowledge of your work performance within the last 3 yrs.

Name: _____	Telephone Number: (____) _____
Address: _____	
No. Street	City State Zip
Occupation: _____	Number of Years Acquainted: _____
Name: _____	Telephone Number: (____) _____
Address: _____	
No. Street	City State Zip
Occupation: _____	Number of Years Acquainted: _____
Name: _____	Telephone Number: (____) _____
Address: _____	
No. Street	City State Zip
Occupation: _____	Number of Years Acquainted: _____

APPLICATION FOR EMPLOYMENT - PAGE 4 OF 4

PLEASE READ CAREFULLY - INITIAL EACH PARAGRAPH AND SIGN BELOW

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the company to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships, and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by the company, that all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the company, whether during or after that employment, will be submitted to binding arbitration. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

Applicant Name: _____
(Printed)

Applicant Signature: _____

Date: _____

INTERVIEWER'S USE ONLY

Interviewed by: _____ Date: _____
Comments: _____

Recommendation for Hire: Yes No
Position: _____ Wages: _____ Location: _____

Interviewer: Additional information that may be necessary to complete an applicant's record may be obtained from the personnel administrator.