



# PRE-EMPLOYMENT APPLICATION

Our Company is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status or any disability as provided in the Americans With Disabilities Act.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered.

## PERSONAL

DATE: \_\_\_\_\_

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Last First Middle AC

Present Address: \_\_\_\_\_  
No. Street City State ZIP

Social Security No. \_\_\_\_\_ Are you over 18? Yes  No

Are you a citizen of the U.S. or do you have the legal right to be employed in the United States? Yes  No

Have you ever been convicted of any crime (excluding minor traffic violations) including driving while under the influence of alcohol or drugs? Yes  No

If yes, state the offense, location, date and disposition \_\_\_\_\_

NOTE: A conviction will not necessarily disqualify you from employment.

Do you have the ability, with or without reasonable accommodations, to work overtime or to travel if travel and/or overtime are required by the job for which you are applying? Yes  No

If no, please explain \_\_\_\_\_

Drivers License: State \_\_\_\_\_ Type \_\_\_\_\_ Currently Valid? Yes  No

## EMPLOYMENT DESIRED

Are you seeking  full-time  part-time  temporary or summer employment?

Position applied for \_\_\_\_\_ Salary Desired \_\_\_\_\_

Date Available to start \_\_\_\_\_

Have you ever applied to our company before? Yes  No

Have you ever worked for our company before? Yes  No

If your answer to either of the above questions is Yes, state when and where you applied and/or worked.

How did you learn of our company and/or position? \_\_\_\_\_

Are there any days or hours you would be unable or unwilling to work? Yes  No

If yes, please specify those days or hours you would be unable or unwilling to work \_\_\_\_\_

**EDUCATION**

Name, Address and Location	Dates	Graduate?	Courses Studied
High School		Yes <input type="checkbox"/> No <input type="checkbox"/>	Diploma:
College	From: To:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Diploma:
Trade School	From: To:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Diploma:

If you did not graduate, why did you leave high school or college? \_\_\_\_\_

Are you planning to pursue further studies? Yes  No  If so, when, where and what courses? \_\_\_\_\_

List any scholastic honors, offices held and activities involved in during high school and college \_\_\_\_\_

List and describe any other School or Specialized Training \_\_\_\_\_

**MILITARY**

Have you ever served in the military? Yes  No

Service Branch \_\_\_\_\_ Date Entered \_\_\_\_\_

Date Separated \_\_\_\_\_ Final Rank \_\_\_\_\_

**CAPABILITY/ RELIABILITY**

Would you be willing and able to perform all of the tasks required by the job you are applying for? Yes  No

If not, explain which tasks \_\_\_\_\_

Have you filed any type of fraudulent claim against any of your present or past employers? Yes  No

If yes, explain \_\_\_\_\_

Will you abide by the safety rules of this company? Yes  No

Have you ever been disciplined for violating company safety rules or regulations? Yes  No

If yes, please explain \_\_\_\_\_

## WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

**PLEASE GIVE MONTH AND YEAR.**

**DO NOT REFERENCE YOUR RESUME.**

Name of Employer: Address: City, State, Zip Code:	Name and Title of Last Supervisor: Dates Employed - From (m/y):                      To (m/y): Pay - Starting: \$    Ending: \$
Telephone (with AC):	Nature of Business:
Title:	Reason for Leaving:
Duties:	

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Duties:	

**SUPPLEMENTAL EMPLOYMENT INFORMATION**

If you worked in any of your previous positions under another name, please give that name(s) below: (For reference checking purposes)

Name \_\_\_\_\_ Company \_\_\_\_\_      Name \_\_\_\_\_ Company \_\_\_\_\_

Are you presently employed? Yes  No

If yes, may we contact your present employer? Yes  No

**REFERENCES**

Give three references, not relatives or former employers.

Name	Address	Phone	Occupation

**AFFIDAVIT**

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge.

I hereby authorize the Company to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. I also understand that my employment is "at-will" and may be terminated by myself or by the company at any time for any reason or no reason at all, with or without prior notice.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**COMPANY USE ONLY-REFERENCE COMMENT**

Interviewed by: \_\_\_\_\_

Interviewers remarks: \_\_\_\_\_

Job offered: \_\_\_\_\_ Yes  No

Salary offered: \_\_\_\_\_

Start date: \_\_\_\_\_

Time already need off: \_\_\_\_\_