Sample Employment Application Form

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

APPLICATION FOR EMPLOYMENT

PLEASE COMPLETE PAGES 1-5.  

DATE ______________________________

Name _____________________________________________________________________________________________

Last    First    Middle    Maiden

Present address _____________________________________________________________________________________

Number   Street   City    State    Zip

How long ____________________  Social Security No. _______ – _____ – _________

Telephone (      )

If under 18, please list age ____________________

Position applied for (1) _______________________

and salary desired (2) ______________________

(Be specific)

Days/hours available to work

No Pref ______  Thur ________

Mon _______  Fri _________

Tue ________  Sat _________

Wed ________  Sun ________

How many hours can you work weekly? ________________________  Can you work nights? ______________________

Employment desired □ FULL-TIME ONLY  □ PART-TIME ONLY  □ FULL- OR PART-TIME

When available for work? _______________

<table>
<thead>
<tr>
<th>TYPE OF SCHOOL</th>
<th>NAME OF SCHOOL</th>
<th>LOCATION (Complete mailing address)</th>
<th>NUMBER OF YEARS COMPLETED</th>
<th>MAJOR &amp; DEGREE</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>College</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bus. or Trade School</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional School</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Have you ever been convicted of any violation of law, including moving traffic violations? □ No  □ Yes

If yes, then please provide the following:

Describe the Offense

Statute / Ordinance (if known)  Date of Charge  Date of Conviction

County, City, and State of Conviction:
APPLICATION FOR EMPLOYMENT

DO YOU HAVE A DRIVER’S LICENSE?  □ Yes  □ No

What is your means of transportation to work? ________________________________________________________________

Driver’s license number _____________________________ State of issue _______ □ Operator  □ Commercial (CDL)

□ Chauffeur

Expiration date ________________

Have you had any accidents during the past three years? How many? ________________

Have you had any moving violations during the past three years? How Many? ________________

<table>
<thead>
<tr>
<th>Check Appropriate Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Yes  □ No  _____ WPM</td>
</tr>
<tr>
<td>□ Yes  □ No  10-key  _____ WPM</td>
</tr>
<tr>
<td>□ Yes  □ No  _____ WPM</td>
</tr>
<tr>
<td>□ Yes  □ No  10-key  _____ WPM</td>
</tr>
</tbody>
</table>

Type

Personal □ Yes  □ No  PC  □

Computer □ Yes  □ No  Mac  □

Other __________________________ Skills __________________________

Please list two references other than relatives or previous employers.

Name __________________________ Name __________________________

Position __________________________ Position __________________________

Company __________________________ Company __________________________

Address __________________________ Address __________________________

Telephone (____) __________________________ Telephone (____) 

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.
APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES?  □ Yes  □ No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?  □ Yes  □ No

Specialty ___________________________ Date Entered ______________ Discharge Date ____________

Work Experience  Please list your work experience for the past ten years beginning with your most recent job held.
If you were self-employed, give firm name.  Attach additional sheets if necessary.

Name of employer
Address
City, State, Zip Code
Phone number

Name of last supervisor
Employment dates
Pay or salary

From
To
Start
Final

Your last job title

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of employer
Address
City, State, Zip Code
Phone number

Name of last supervisor
Employment dates
Pay or salary

From
To
Start
Final

Your Last Job Title

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.
# APPLICATION FOR EMPLOYMENT

## Work experience

Please list your work experience for the **past ten years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

<table>
<thead>
<tr>
<th>Name of employer</th>
<th>Name of last supervisor</th>
<th>Employment dates</th>
<th>Pay or salary</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>From</td>
<td>Start</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To</td>
<td>Final</td>
</tr>
</tbody>
</table>

**Your last job title**

**Reason for leaving (be specific)**

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

<table>
<thead>
<tr>
<th>Name of employer</th>
<th>Name of last supervisor</th>
<th>Employment dates</th>
<th>Pay or salary</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>From</td>
<td>Start</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To</td>
<td>Final</td>
</tr>
</tbody>
</table>

**Your last job title**

**Reason for leaving (be specific)**

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

---

May we contact your present employer?  
- Yes  
- No

Did you complete this application yourself?  
- Yes  
- No

If not, who did?  

_________________________________________
APPLICATION FORM WAIVER

In exchange for the consideration of my job application by "the Company", I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and the Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant: ____________________________ Date: ___________________

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.