

APPLICATION FOR EMPLOYMENT

NAME: _____	DATE: _____
ADDRESS: _____	
CITY, STATE, ZIP: _____	
PHONE NUMBER: _____	REFERRED BY: _____
CELL NUMBER: _____	
POSITION DESIRED: _____	DRIVERS LICENSE: _____
ARE YOU EMPLOYED NOW? _____	CDL LICENSE: _____
EVER APPLIED TO THIS COMPANY BEFORE? _____	WHEN: _____
DATE YOU CAN START: _____	SALARY DESIRED: _____

GRAMMAR SCHOOL: _____	DATE GRADUATED: _____
HIGH SCHOOL: _____	DATE GRADUATED: _____
COLLEGE: _____	DATE GRADUATED: _____
TRADE SCHOOL: _____	DATE GRADUATED: _____
U.S. MILITARY OR NAVAL SERVICE: _____	RANK: _____
PRESENT MEMBERSHIP IN NATIONAL GUARDS OR SERVICE: _____	

FORMER EMPLOYERS (LIST BELOW LAST 4 EMPLOYERS, STARTING WITH MOST RECENT)

NAME	DATES EMPLOYED	SALARY	POSITION	REASON FOR LEAVING
	FROM			
	TO			
	FROM			
	TO			
	FROM			
	TO			
	FROM			
	TO			

REFERENCES (NOT RELATED TO YOU, WHOM YOU HAVE KNOW AT LEAST ONE YEAR)

NAME	ADDRESS	BUSINESS	YEARS AQUAINTED

PHYSICAL RECORD

WERE YOU EVER INJURED: _____	GIVE DETAILS: _____
HAVE YOU ANY DEFECTS IN HEARING? _____	GIVE DETAILS: _____
HAVE YOU ANY DEFECTS IN VISION? _____	GIVE DETAILS: _____
HAVE YOU ANY DEFECTS IN SPEECH? _____	GIVE DETAILS: _____
<p>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 SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.</p>	

SIGNATURE: _____ **DATE:** _____