

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

DATE

Name (last name first)		Social Security Number	
Present Address	City	State	Zip Code
Permanent Address	City	State	Zip Code
Phone No		Are You 18 Years Or Older?	
Are You Prevented From Lawfully Becoming Employed In This Country Because Of Visa Or Immigration Status?			

EMPLOYMENT DESIRED

Position	Date You Can Start	Salary Desired
Are You Employed Now?	If so, may we inquire of your present employer?	
Ever Applied To This Company Before?	Where	When
Referred By		

EDUCATION	Name & Location of School	No Of Years Attended	Did You Graduate?	Subjects Studied
Grammar School				
High School				
College				
Trade, Business or Correspondence School				

GENERAL

Subjects Of Special Study Or Research Work		
Special Skills		
Activities: (Civic, Athletic, Etc) Exclude Organizations, The Name Of Which Indicates The Race, Creed, Sex, Age, Marital Status, Color Or Nation Of Its Members		
U.S. Military or Naval Service	Rank	Present Membership In National Guard Or Reserves

FORMER EMPLOYERS (List Below Last Three Employers, Starting With Last One First)

Date Month & Year	Name & Address Of Employer	Salary	Position	Reason For Leaving
From				
To				
From				
To				
From				
To				
From				
To				
Which Of These Jobs Did You Like Best?				
What Did You Like Most About This Job?				

REFERENCES Give The Names of Three Persons Not Related To You, Whom You Have Known At Least One Year

Name	Address	Business	Years Acquainted
1.			
2.			
3.			

THE FOLLOWING STATEMENT APPLIES IN: MARYLAND & MASSACHUSETTS (Fill in name of state)

IT IS UNLAWFUL IN THE STATE OF _____ TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

Signature of Applicant

IN CASE OF

EMERGENCY NOTIFY _____

NAME

ADDRESS

PHONE NO

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN ITS PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

Date

Signature

----- Do Not Write Below This Line -----

INTERVIEWED BY _____

DATE _____

REMARKS: _____

NEATNESS _____

ABILITY _____

HIRED _____

POSITION _____

DEPT _____

SALARY/WAGE _____

DATE REPORTING TO WORK _____

APPROVED 1. _____

2. _____

3. _____

EMPLOYMENT MANAGER

DEPT HEAD

GENERAL MANAGER

Submit Application By Email