



# Application for Employment

*Pre Employment Questionnaire*

DATE OF APPLICATION: \_\_\_\_\_

## PERSONAL INFORMATION

NAME \_\_\_\_\_ Email Address \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_  
 (STREET) (CITY) (STATE) (ZIP)

PHONE # \_\_\_\_\_ ARE YOU 18 OR OVER: \_\_\_\_\_

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED  
 IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS YES OR NO

## EMPLOYMENT DESIRED

POSITION \_\_\_\_\_ DATE YOU CAN START: \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_ MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? \_\_\_\_\_

HAVE YOU EVER APPLIED TO THE COMPANY BEFORE? \_\_\_\_\_ WHEN? \_\_\_\_\_

REFERRED BY: \_\_\_\_\_

## EDUCATION

SCHOOL	LOCATION	GRADUATED?	YEARS	SUBJECT
HIGH SCHOOL				
COLLEGE				
COLLEGE				

## GENERAL

SUBJECTS OF SPECIAL STUDY OR INTEREST \_\_\_\_\_

SPECIAL SKILLS \_\_\_\_\_

ACTIVITIES: (I.E. CIVIC, ATHLETIC ETC.) \_\_\_\_\_

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES RACE, CREED, SEX, MARITAL STATUS, COLOR  
 OR NATION OF ORIGIN OF IT MEMBERS.

U.S. MILITARY SERVICE \_\_\_\_\_ RANK \_\_\_\_\_ NATIONAL GUARD OR RESERVES? \_\_\_\_\_

## FORMER EMPLOYERS

PLEASE NOTE THAT WE MAY CHECK WITH ANY/ALL PAST EMPLOYERS FOR REFERENCES.

*(LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)*

DATES	NAME AND ADDRESS OF EMPLOYER	POSITION/SALARY	REASON FOR LEAVING
FROM TO	PHONE #		
FROM TO	PHONE #		
FROM TO	PHONE #		

WHICH OF THESE JOBS DID YOU LIKE THE BEST?

WHAT DID YOU LIKE MOST ABOUT THE JOB?

## REFERENCES

*GIVE THE NAMES OF THREE EMPLOYMENT REFERENCES, NOT RELATED TO YOU.*

NAME	PHONE NUMBER	BUSINESS	YEARS ACQUAINTED
1			
2			
3			

IN CASE OF EMERGENCY, PLEASE NOTIFY:

NAME:

PHONE NUMBER:

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF 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 IT'S 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 FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE AGREEMENT CONTRARY TO THE FOREGOING.

DATE

SIGNATURE