

Employment Application

PERSO	NAL						Da	te			
Name		First			Social Security No						
Dracant						Middle Initial					
rieseii	. Addi Ess.	No.		Street				Cit	у		State Zip
Telephone No. () Position /			Applied For				Earni	ings Expected \$			
In the t	able belov	w, indicate	the hou	rs you are	avail	able each	day. [o you	want to wo	rk 🗖 Ful	I-time or 🚨 Part-time
	Mon Tue Wed Thu		Thu	Fri Sat			Sun	Do you h	Do you have reliable transportation?		
AM									1		☐ Yes ☐ No
PM									When co	uld vou	
Have you worked for us before? Yes No If yes, where? When?											
Who was your supervisor?											
How did you learn of this position?											
If hired, on what date will you be available to start work?											
Are yo	Are you at least eighteen (18) years of age? ☐ Yes ☐ No										
If not,	If not, can you submit a work permit? Yes No										
Are you a United States Citizen or authorized to work in the United States? Yes No											
If hired, according to the Immigration Reform and Control Act of 1986, you will be required to submit proof of citizenship or work authorization.											
Have you been convicted of a felony within the last five (5) years? \(\sigma \) Yes \(\sigma \) No											
If yes, please explain the conviction											
(The existence of a criminal record does not create an automatic barrier to employment.)											
EDUCATION AND TRAINING											
	N	IAME OF SCI				RCLE LAST YEAR OMPLETED		YOU UATE?	DEGREE RECEIVED		MAJOR SUBJECTS STUDIED
Nama		HIGH SCHOO	OL				,,			☐ GENERA	
Name 1			2 3 4	Yes 🔲 [NO		COLLEG	E PREP			
	<u> </u>	COLLEGE									
Name					1	2 3 4		No		MAJOR	
Address		CDADUATE CO	1001							MINOR	
GRADUATE SCHOOL Name			234	Yes	No		MAJOR				
Address						MINOR					
	TRADE SCHOOL						.,			MAJOR	
Name					1	2 3 4	Yes	No □			
Address		ILLS AND MA	CHINES OR F	OUIPMENT V	OU CAP	N OPFRATF				MINOR	
LIST SPECIFIC JOB SKILLS AND MACHINES OR EQUIPMENT YOU CAN OPERATE											
REFERENCES (Do not include relatives)											
Name and Occupation						Addre	Phone Number				
1.											
2.											
3.											

DATES		NAME, ADDRESS AND TELEPHONE NUMBERS OF EMPLOYER	RATE (OF PAY	SUPERVISOR'S NAME, TITLE & PHONE NUMBER	REASON FOR LEAVING
From	То		Start	Finish		
OUR TITI	LE	DESCRIB	E IN DETAIL	THE WORK	YOU DID	
DATES		NAME, ADDRESS AND TELEPHONE NUMBERS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME, TITLE & PHONE NUMBER	REASON FOR LEAVING
From	То		Start	Finish		
OUR TITI	LE	DESCRIB	E IN DETAIL	THE WORK	YOU DID	
DATES		NAME, ADDRESS AND TELEPHONE NUMBERS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME, TITLE & PHONE NUMBER	REASON FOR LEAVING
From	То		Start	Finish		
OUR TITI	LE	DESCRIB	E IN DETAIL	THE WORK	YOU DID	
May we	contact t	he employers listed above?	If no	ot, indicat	e below which one(s) you do	not wish us to contac
SUMMA	ARY					
		of an application blank makes it diffi position for you, use the space below				
			PLEASE RE	AD CARE	FULLY	
					AND AGREEMENT	
omission o of my pers understand	or falsified sta sonal history d and agree with or with	set forth in this employment application atements on this application shall be co through any investigative agency of bur that if employment is offered to me and out notice, by myself or by the compan	nsidered suff eau of your o d I accept em	icient reaso choice. How ployment, n	n for dismissal. You are hereby author vever, I will be advised if an investigati ny employment may be terminated at	rized to make any investigat on report is obtained. I will at any time with or witl
Date		Signature of Applicant				

Our company is and Equal Opportunity Employer, without regard to race, color, creed, sex, national origin, age, handicap or other protected groups.