



Application for Employment

Date \_\_\_\_\_

Name \_\_\_\_\_  
First Middle Last Maiden

Address \_\_\_\_\_  
Number/Street City State Zip How Long \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ If under 18, please list age \_\_\_\_\_

Position applied for \_\_\_\_\_ Desired Salary \_\_\_\_\_  
(Be specific)

Desired Employment: \_\_\_ Full-Time Only \_\_\_ Part-Time Only \_\_\_ Either

Date you can begin work: \_\_\_\_\_

Computer Skills: Typing WPM \_\_\_ PCS \_\_\_ Microsoft Word \_\_\_ Excel \_\_\_ Outlook \_\_\_

**Education**

Type of School	Name of School/ Location	# of years Completed	Major/Degree
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High School

College

Bus. or Trade School

Professional School

Have You Ever Been Convicted of a crime? \_\_\_ No \_\_\_ Yes

If yes, please explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

\_\_\_\_\_  
\_\_\_\_\_

Do you have a driver's license? \_\_\_ No \_\_\_ Yes

What is your means of transportation to work? \_\_\_\_\_

Have you ever been in the Armed Forces? No/Yes Are you now a member of the National Guard? No/Yes

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

**Work Experience**

Please list your work experience for the past five 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 \_\_\_\_\_

Phone Number \_\_\_\_\_

Name of last supervisor \_\_\_\_\_

Employment dates                      From \_\_\_\_\_ To \_\_\_\_\_

Pay/Salary                                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.

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**Work Experience, continued**

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Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

Name of last supervisor \_\_\_\_\_

Employment dates                      From \_\_\_\_\_ To \_\_\_\_\_

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(Be specific)

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If you don't have at least four previous employers, please provide personal references below.

Name \_\_\_\_\_

Position \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Name \_\_\_\_\_

Position \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

May we contact your present employer?  No  Yes

Signature: \_\_\_\_\_