

# APPLICATION FOR EMPLOYMENT

(Pre-Employment questionnaire) (An Equal Opportunity Employer)

## PERSONAL INFORMATION

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
LAST FIRST MI

SS#: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP

PHONE #: \_\_\_\_\_ ARE YOU 18 YEARS OLD OR OLDER?    yes    no

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS?    yes    no

## EMPLOYMENT DESIRED

POSTION: \_\_\_\_\_ SALARY DESIRED: \_\_\_\_\_

CURRENTLY EMPLOYED?    yes    no    IF SO, MAY WE CONTACT EMPLOYER?    yes    no

DESIRED START DATE: \_\_\_\_\_ REFERRED BY: \_\_\_\_\_

## EDUCATION

	NAME & LOCATION OF SCHOOL	# YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
GRAMMER SCHOOL				
HIGH SCHOOL				
COLLEGE				
OTHER				

## GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK: \_\_\_\_\_

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

ACTIVITIES: (Civic, Athletic, Etc.) : \_\_\_\_\_

EXCLUDE ORGANIZATIONS THAT THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS

U.S. MILITARY SERVICE: \_\_\_\_\_

RANK: \_\_\_\_\_ PRESENTLY ENLISTED?    yes    no

**FORMER EMPLOYERS** (List below the last three employers, starting with the most recent)

EMPLOYMENT DATES	NAME & ADDRESS OF EMPLOYER	POSITION	REASON FOR LEAVING
START:			
END:			
START:			
END:			
START:			
END:			

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 for at least one year)

NAME	CONTACT INFORMATION	OCCUPATION/BUSINESS	YEARS KNOWN

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 ITS PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

NEATNESS: \_\_\_\_\_

ABILITY: \_\_\_\_\_

HIRED  yes  no POSITION: \_\_\_\_\_ DEPT: \_\_\_\_\_

SALARY/WAGE: \_\_\_\_\_ START DATE: \_\_\_\_\_

APPROVALS 1.) \_\_\_\_\_ 2.) \_\_\_\_\_ 3.) \_\_\_\_\_  
DEPARTMENT HEAD HUMAN RESOURCES FIRST SELECTMAN