

# PRE-APPLICATION FOR EMPLOYMENT

*We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion or national origin*

**CLIENT NAME:** \_\_\_\_\_

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

**APPLICANT'S NAME:** \_\_\_\_\_

LAST

FIRST

MIDDLE

**PRESENT ADDRESS:** \_\_\_\_\_

STREET

CITY

STATE

ZIP

**PERMANENT ADDRESS:** \_\_\_\_\_

STREET

CITY

STATE

ZIP

**TELEPHONE #:** \_\_\_\_\_

**CELL PHONE #:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

## EMPLOYMENT INFORMATION

Position Applying For: _____	Desired Salary: \$ _____ per _____ hour
Are you willing to work overtime if required? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> Full Time (over 30 hrs/wk) <input type="checkbox"/> Part Time _____ hrs/wk
Are there any shifts or hours you cannot work? <input type="checkbox"/> YES <input type="checkbox"/> NO	If YES, hours, shifts or days: _____

EDUCATION	Name and Location of School	Circle Last Year Completed	Did You Graduate?	Subjects Studied & Degree(s) Received
Grammar School	_____		<input type="checkbox"/> YES <input type="checkbox"/> NO	
	_____			
High School	_____	1   2   3   4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
	_____			
College	_____	1   2   3   4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
	_____			
Trade, Business or Correspondence School	_____	1   2   3   4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
	_____			

**FORMER EMPLOYERS:** List below last four employers, beginning with most recent.

Dates (mo/yr)	Name, Address and Telephone Number of Employer	Salary	Position	Reason for Leaving
	(   )			
	(   )			
	(   )			
	(   )			

**REFERENCES:** Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted

*I authorize investigation of all statements contained in this application, I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is not for a definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.*

**SIGNATURE:** \_\_\_\_\_

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

**INTERVIEWED BY:** \_\_\_\_\_

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