



# APPLICATION FOR EMPLOYMENT

## PERSONAL DATA

FULL NAME \_\_\_\_\_ DATE \_\_\_\_\_  
LAST FIRST MIDDLE

ADDRESS \_\_\_\_\_ PHONE NO. \_\_\_\_\_  
NUMBER & STREET CITY STATE ZIP

POSITION DESIRED \_\_\_\_\_ Part Time  Full Time

How did you hear about us & what do you know of the company?

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Have you worked in this particular field before?  Yes  No If yes, for how long? \_\_\_\_\_

Are you currently employed?  Yes  No If yes, what is your title? \_\_\_\_\_

Are you under 21 yrs old?  Yes  No Number of days absent from work last year? Explain: \_\_\_\_\_

Do you have transportation to work?  Yes  No Can you work until 2am if needed?  Yes  No

### Your weekly availability between 10am -2am

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

## EDUCATION

Name & Location of School	Number of Years Completed	Major	Degree
High School			
Univ./College			
Univ./College			
Military, Business Trade, Other			

## EMPLOYMENT HISTORY

### Name Your present or most recent employer:

Starting Salary \$ _____	Address: _____	City & State: _____
from Mo. _____ Mo. _____		
to Mo. _____ Mo. _____	Supervisor: _____	Phone No: _____
Ending Salary \$ _____	Title of position held and duties performed: _____	

### Reasons for leaving?

### Name Previous employer:

Starting Salary \$ _____	Address: _____	City & State: _____
from Mo. _____ Mo. _____		
to Mo. _____ Mo. _____	Supervisor: _____	Phone No: _____
Ending Salary \$ _____	Title of position held and duties performed: _____	

### Reasons for leaving?

List any other jobs not covered above.

Name of Company	Position	Employment Dates	Ending Dates	Reasons for Leaving

## SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience.

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## ANYTHING YOU WOULD LIKE TO ADD TO HELP OUR CONSIDERATION

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### PLEASE READ THE FOLLOWING STATEMENTS BEFORE SIGNING BELOW

The facts set forth in this application for employment are true and complete. I understand that if employed, false statements, omissions or misleading statements on this application shall be considered sufficient cause for dismissal and I agree that my prospective employer shall not be held liable in any respect if my employment is terminated because of such omissions or false or misleading statements. My prospective employer is hereby authorized to investigate my employment history, including the contacting of the employers listed on the previous page. I hereby release my former employers from all liability on account of furnishing information regarding my work record to my respective employer. (If there is a particular employer you do not wish us to contact, please indicate which one and why.) I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time without any prior notice. I further understand and agree to abide by all company procedures and safety rules, including submitting to substance abuse testing, if requested, as a condition of continued employment

Signature \_\_\_\_\_ Date \_\_\_\_\_