



APPLICATION FOR **EMPLOYMENT**

PRE-EMPLOYMENT QUESTIONNAIRE

AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

NAME		· .					
PRESENT ADDRESS (Street,	City, State, Zip)						
PERMANENT ADDRESS (s	treet, City, State, Zip)		·				
TELEPHONE #		E-MAIL ADDRESS					
are you either a u.s.	CITIZEN OR AN ALIEN A	UTHORIZED TO WORK I	IN THE UNITED STATES?	YES NO			
are you 18 years of .	age or older? Ye	ES NO					
	<u>EM</u>	IPLOYMENT DESIF	RED				
•							
POSITION		Date you can start salary desired					
are you presently em	PLOYED? YES N	0					
IN SO, MAY WE INQUIR	e of Your Present Emp	PLOYER? YES	NO				
HAVE YOU EVER APPLIED) TO THIS COMPANY BEF	FORE? YES NO	D IF SO, WHEN	·			
EDUCATION	NAME AND LOCATION OF SCHOOL	NUMBER OF YEARS ATTENTED	*DID YOU GRADUATE?	SUBJECTS STUDIED			
GRAMMAR SCHOOL							
HIGH SCHOOL	·			· .			
COLLEGE							
OTHER							
		GENERAL					
SUBJECTS OF SPECIAL ST	fudy or research wo	RK					
**ACTIVITIES (Civic, Athletic,	etc.)	SPECIAL SK	ILLSPRESENT MEMBEI	OCUID IN			

- * The Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.
 ** Exclude organizations, the name of which indicates the race, creed, sex, age, marital status, color, or nation of origin of its members.

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

DATE MONTH / YEAR	NAME & ADDRESS OF EMPLOYER	NAME & TELEPHONE OF SUPERVISOR		SALARY	POSITION	REASON FOR LEAVING	
FROM							
FROM							
TO	-	<u> </u>					
FROM TO					·		
FROM					·		
OF THESE IOBS. WI	LICH DID YOU PREI	 -ER?		WH	Y?		
			REFERE	NCES			
<u></u>					known at least one year)	YEARS KNOWN	
NAME	ADDRES (Street, City, St		TELEPHONE	NUMBER	BUSINESS	IDAG NIOWN	
·	·						
employed, falsified sta I authorize investigation my previous employmesult from furnishing	tements on this application of all statements connent and any pertinent	ation shall t ntained her information nployment	pe grounds for thein and the ref they may have the for no defini	ferences listed al e, and release al	parties from all stability	understand that, If all information concerning for any damage that may se of payment of my wages	
•							
•							
		00 NO	t Write	BELOW TH	HIS LINE		
INTERMEMED BY _					DATE.		
REMARKS			· .				
NEATNESS	ABILITY						
						Π	
	DATE REPORTING TO WORK						
APPRO <u>VED BY:</u>							
	D						
						·	
J., 1, 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,							

Revised 12/2017—PC