**** Application for Employment

Pre-Employment Questionnaire • Equal Opportunity Employer

Personal Information

|  |  |
| --- | --- |
| Name (First and Last) | Phone Number |
| Present Address | Email |
| Referred by: |  |

Employment Desired

|  |  |  |
| --- | --- | --- |
| Position | When can you start? | Salary Desired |
| Availability | Ever applied here before? □ Yes □ No | When? Did you talk to anyone? |

Education History

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Name and Location of School | Years Attended | Did you graduate? | Subjects Studied |
| High School |  |  |  |  |
| College |  |  |  |  |
| Other Education |  |  |  |  |

General Information

|  |
| --- |
| Any special research, training, or skills? |
| U.S. Military Service? |
| Interests |
| Anything you’d like us to know about you? |

Former Employers

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date (MM/YY) | Name & Address of Employer | Salary | Position | Reason for Leaving |
| From |  |  |  |  |
| To |  |  |  |  |
| From |  |  |  |  |
| To |  |  |  |  |
| From |  |  |  |  |
| To |  |  |  |  |
| From |  |  |  |  |
| To |  |  |  |  |

References (Give below the names of three persons not related to you, whom you have known at least one year.)

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Phone Number | Business/ Relationship | Years Known |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Authorization

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act and other relevant federal and state laws.”

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

**Date** **Signature**