



## Employment Application

### PERSONAL INFORMATION

Name:

Address:

City, State, Zip:

Home Phone:

Cell Phone:

E-mail:

Are you legally entitled to work in the U.S.? Yes:  No:

Are you over 18 years old? Yes:  No:

Have you ever been convicted of a crime? No:  Yes:  If yes, explain:

What position are you applying for?

Date available?

Full Time  or Part Time  If Part Time, number of hours desired per week:

Shifts Available (check all that apply):

Monday am  pm   
Tuesday am  pm   
Wednesday am  pm   
Thursday am  pm

Friday am  pm   
Saturday am  pm   
Sunday am  pm   
Available Anytime

### EDUCATION

#### High School:

Name of School:

Location:

Number of years attended:

Did you graduate? Yes:  No:

#### College & Post Graduate:

Name of School:

Location:

Number of years attended:

Did you graduate? Yes:  No:

Name of School:

Location:

Number of years attended:

Did you graduate? Yes:  No:

**Trade School:**

Name of School:

Location:

Number of years attended:

Did you graduate? Yes:  No:

**EMPLOYMENT HISTORY**

Beginning with your most recent employment and working back in time, please provide the following information.

Employer:

Address:

Job Title:

Responsibilities:

Dates of Employment:

Salary:

Supervisor:

Phone Number:

Reason for Leaving:

Employer:

Address:

Job Title:

Responsibilities:

Dates of Employment:

Salary:

Supervisor:

Phone Number:

Reason for Leaving:

Employer:

Address:

Job Title:

Responsibilities:

Dates of Employment:

Salary:

Supervisor:

Phone Number:

Reason for Leaving:

Why do you want to work for our company?

Name three of your strengths (in a work/school environment).

- 1.
- 2.
- 3.

Name three of your weaknesses (in a work/school environment). (If you leave it blank we will be disappointed.)

- 1.
- 2.
- 3.

How could you improve our company?

What is your greatest accomplishment?

What makes you stand out from others?

What things are you passionate about?

Please tell us about any other training, education, skills or achievements that you feel should be considered.

Do you smoke? Yes:  No:

What do you eat?

## REFERENCES

Please provide the names of two references who have not employed you and are not related to you.

Name:

Relationship to You:

Address:

Phone Number:

Name:

Relationship to You:

Address:

Phone Number:

My answers are true and complete. I understand that if I am hired, any false or incomplete statements in this application will be grounds for an immediate discharge. (You will be asked to sign and date this application in person when you are interviewed for a position.)

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_