



# EMPLOYMENT APPLICATION

Feel free to attach a resume if you have one

## GENERAL INFORMATION

APPLICANT NAME \_\_\_\_\_ DATE \_\_\_\_\_  
 PRESENT ADDRESS \_\_\_\_\_ HOW LONG \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE # \_\_\_\_\_  
 ARE YOU A CITIZEN OF THE U.S.? \_\_\_\_\_ YES \_\_\_\_\_ NO SOCIAL SECURITY # \_\_\_\_\_  
 DO YOU HAVE A VALID DRIVERS LICENSE? \_\_\_\_\_ YES \_\_\_\_\_ NO STATE \_\_\_\_\_ LICENSE # \_\_\_\_\_  
 DATE AVAILABLE FOR WORK? \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ TYPE OF EMPLOYMENT DESIRED: \_\_\_\_\_  
 WERE YOU EVER BONDED? \_\_\_\_\_ YES \_\_\_\_\_ NO HAS BOND EVER BEEN REFUSED? \_\_\_\_\_ YES \_\_\_\_\_ NO  
 HAVE YOU EVER BEEN CONVICTED OF A CRIME? \_\_\_\_\_ YES \_\_\_\_\_ NO IF YES WHEN? \_\_\_\_\_

## EDUCATION INFORMATION

HIGH SCHOOL (circle last year completed) 1 2 3 4 NAME \_\_\_\_\_  
 DATES From \_\_\_\_\_ To \_\_\_\_\_ DEGREE RECEIVED \_\_\_\_\_  
 COLLEGE (circle last year completed) 1 2 3 4 NAME \_\_\_\_\_  
 DATES From \_\_\_\_\_ To \_\_\_\_\_ DEGREE RECEIVED \_\_\_\_\_  
 BUSINESS OR TRADE SCHOOL - NAME \_\_\_\_\_

## SKILLS and QUALIFICATIONS

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## SPECIAL ACTIVITIES

NAME OF ANY ORGANIZATION                      OFFICES HELD                      AVG. TIME GIVEN PER WEEK

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## EMPLOYMENT HISTORY

Most Recent Position First

COMPANY NAME _____	TELEPHONE NUMBER _____
COMPANY ADDRESS _____	CITY _____ STATE _____ ZIP _____
KIND OF BUSINESS _____	POSITION HELD _____
NAME OF SUPERVISOR _____	DATES EMPLOYED from _____ to _____
EARNINGS PER MONTH at start _____	when leaving _____
REASONS FOR LEAVING _____	
_____	
_____	

COMPANY NAME _____	TELEPHONE NUMBER _____
COMPANY ADDRESS _____	CITY _____ STATE _____ ZIP _____
KIND OF BUSINESS _____	POSITION HELD _____
NAME OF SUPERVISOR _____	DATES EMPLOYED from _____ to _____
EARNINGS PER MONTH at start _____	when leaving _____
REASONS FOR LEAVING _____	
_____	
_____	

COMPANY NAME _____	TELEPHONE NUMBER _____
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_____	
_____	

COMPANY NAME _____	TELEPHONE NUMBER _____
COMPANY ADDRESS _____	CITY _____ STATE _____ ZIP _____
KIND OF BUSINESS _____	POSITION HELD _____
NAME OF SUPERVISOR _____	DATES EMPLOYED from _____ to _____
EARNINGS PER MONTH at start _____	when leaving _____
REASONS FOR LEAVING _____	
_____	
_____	

**PERSONAL**

WHAT ARE YOUR STRENGTHS AND WEAKNESSES? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT AREAS SHOULD WE PAY SPECIAL ATTENTION TO DURING TRAINING TO GET YOU OFF TO A GOOD START?  
\_\_\_\_\_  
\_\_\_\_\_

WHAT APPEALS TO YOU MOST ABOUT THIS POSITION? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT APPEALS TO YOU LEAST ABOUT THIS POSITION? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT MOTIVATES YOU? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT TRAITS DID YOUR FAVORITE MANAGER POSSESS? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT DO YOU WANT TO BE DOING FIVE YEARS FROM NOW? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

