

FOR OFFICE USE ONLY	
Possible Work Locations	Possible Positions

# APPLICATION FOR EMPLOYMENT

(PLEASE PRINT PLAINLY)

FOR OFFICE USE ONLY	
Work Location	Rate
Position	Date

## PERSONAL

Date \_\_\_\_\_

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Last      First      Middle

Present address \_\_\_\_\_ Telephone No. \_\_\_\_\_  
No.      Street      City      State      Zip

Are you legally eligible for employment in the U.S.A.? Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, verification will be required.)

Are you of the legal age to work? \_\_\_\_\_

Position(s) applied for \_\_\_\_\_

Were you previously employed by us? \_\_\_\_\_ If yes, when? \_\_\_\_\_

If your application is considered favorably, on what date will you be available for work? \_\_\_\_\_ 19\_\_\_\_

Are there any other experiences, skills, or qualifications which will be of special benefit in the job for which you are applying? (Applicant should not list any information that Federal and/or State law precludes obtaining in the pre-employment stage.) \_\_\_\_\_

## RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Check Last Year Completed				Did You Graduate?	List Diploma or Degree
			5	6	7	8		
Elementary		X					<input type="checkbox"/> Yes <input type="checkbox"/> No	X
High							<input type="checkbox"/> Yes <input type="checkbox"/> No	
College							<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (Specify)							<input type="checkbox"/> Yes <input type="checkbox"/> No	

(Turn to Next Page)



**List below present and past employment, beginning with your most recent**

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
Describe the work you did:								
Telephone								

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
Describe the work you did:								
Telephone								

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
Describe the work you did:								
Telephone								

Name and Address of Company and Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
Describe the work you did:								
Telephone								

I hereby give permission to contact the employers listed above concerning my prior work experience.

Signed \_\_\_\_\_

If there is a particular employer(s), you do not wish us to contact, please indicate which one(s). \_\_\_\_\_

**PERSONAL REFERENCES** (Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number

**PLEASE READ AND SIGN BELOW**

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. I understand and agree that my employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than an officer 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 and then only in a writing signed by an officer.

\_\_\_\_\_  
Signature of Applicant

To Applicant: READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTIONS IN THIS BLOCKED-OFF AREA. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, creed, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to credit data.  
DO NOT ANSWER ANY QUESTION CONTAINED IN THIS BLOCKED-OFF AREA UNLESS THE EMPLOYER HAS CHECKED THE BOX NEXT TO THE QUESTION, thereby indicating that for the position for which you are applying the requested information is needed for a legally permissible reason, including, without limitation, national security requirements, affirmative action, a bona fide occupational qualification or business necessity.

- Previous address \_\_\_\_\_  

No.	Street	City	State	Zip
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- Are you over the age of eighteen? \_\_\_\_\_ If no, hire is subject to verification that you are of minimum legal age.
- Sex: M \_\_\_\_\_ F \_\_\_\_\_       Height: \_\_\_\_\_ ft \_\_\_\_\_ in.       Weight: \_\_\_\_\_ lbs.
- Are you a citizen of the U.S.A.? \_\_\_\_\_
- Were you in U.S. Armed Forces? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, what Branch? \_\_\_\_\_
- Did you receive any training in the U.S. Armed Forces that is relevant to the position applied for? (If yes, describe.) \_\_\_\_\_
  
- Are you a Vietnam veteran? \_\_\_\_\_
- Are you eligible to be bonded? \_\_\_\_\_
- Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, in the past seven years which has not been annulled or expunged or sealed by a court? \_\_\_\_\_ If yes, describe in full \_\_\_\_\_

Conviction of a crime will not be an absolute bar to employment.

- You have been given a written job description listing the essential job functions of the position(s) for which you have applied. Please review the job description(s) and answer the following question. Are you able to perform each of the essential job functions listed for each position for which you have applied? \_\_\_\_\_ If no, list the function(s) you are unable to perform and explain why you are unable to perform them. \_\_\_\_\_

Employer may list other bona fide occupational questions on lines below:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**APPLICANT — Do not write on this page  
FOR INTERVIEWER'S USE**

INTERVIEWER	DATE	COMMENTS

**FOR TEST ADMINISTRATOR'S USE**

TESTS ADMINISTERED	DATE	RAW SCORE	RATING	COMMENTS AND INTERPRETATION

**REFERENCE CHECK**

*Position Number	RESULTS OF REFERENCE CHECK	*Position Number	RESULTS OF REFERENCE CHECK
I		IV	
II			
III			

\*See Page 2

This "Application for Employment" is prepared for general use throughout the United States. Our legal counsel has advised us that the material outside the blocked-off area complied with all Federal and State fair employment practice laws and with the Fair Credit Reporting Act. However, the various fair employment practice laws and related statutes and the interpretations of them change frequently, and neither V.W. Eimicke Associates, Inc. nor its counsel assume any responsibility for the inclusion in this "Application for Employment" of any questions that may violate local and/or State and/or Federal laws. Users should consult their counsel about any legal question they may have with respect to the use of this form.