



PRE-EMPLOYMENT APPLICATION

Our Company is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status or any disability as provided in the Americans With Disabilities Act.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions are answered.

PERSONAL:

Date ____ / ____ / ____

Name _____ Cell Phone (____) _____
LAST FIRST MIDDLE

Present Address _____
No. Street City State Zip

Are you over 18? Yes No

Email Address _____

Are you a citizen of the U.S. or do you have the legal right to be employed in the United States? Yes No

Do you have the ability, with or without reasonable accommodations, to work overtime or to travel if travel and/or overtime are required by the job for which you are applying? Yes No

If no, please explain _____

Would you be willing and able to relocate? Yes No

EMPLOYMENT DESIRED:

Are you seeking full-time part-time

Position applied for _____ Salary desired _____

Date available to start _____

Have you ever applied to our company before? Yes No

Have you ever worked for our company before? Yes No

If your answer to either of the above questions is yes, state when and where you applied and/or worked.

How did you learn of our company and/or position? _____

Are you now, or do you expect to be, working in any other business or job? Yes No

Are there any days or hours you would be unable or unwilling to work? Yes No

If yes, please specify _____

EDUCATION:		
Name, Address and Location	Graduate	Courses Studied
High School	Yes / No	Describe:
College	Yes / No	Describe:
Trade School	Yes / No	Describe:

If you did not graduate, why did you leave high school or college? _____

Are you planning to pursue further studies? Yes No

If so, when, where and what courses? _____

List and describe any other School or Specialized Training _____

MILITARY:

Have you ever served in the military? Yes No

Service Branch _____ Date Entered _____

Date Separated _____ Final Rank _____

CAPABILITY / RELIABILITY:

Would you be willing and able to perform all of the tasks required by the job you are applying for? Yes No

If not, explain which tasks _____

Have you filed any type of fraudulent claim against any of your present or past employers? Yes No

If yes, explain _____

How many days of work (or school) have you missed in the last two years? _____

How many times have you been late for work (or school) in the last two years? _____

Would you be willing and able to report to work on time every day on a regular and consistent basis? Yes No

If no, please explain _____

WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of employment. If self-employed, give firm name and supply business references. **DO NOT REFERENCE YOUR RESUME. PLEASE GIVE MONTH AND YEAR.**

Name of Employer

Address
City, State, Zip Code

Telephone Number

Name and Title of Last Supervisor

Job Title: _____

Duties:

Dates of Employment

From: _____ To: _____

Pay Rate

Starting: _____ Ending: _____

Reason for Leaving: _____

Name of Employer

Address
City, State, Zip Code

Telephone Number

Name and Title of Last Supervisor

Job Title: _____

Duties:

Dates of Employment

From: _____ To: _____

Pay Rate

Starting: _____ Ending: _____

Reason for Leaving: _____

Name of Employer

Address
City, State, Zip Code

Telephone Number

Name and Title of Last Supervisor

Job Title: _____

Duties:

Dates of Employment

From: _____ To: _____

Pay Rate

Starting: _____ Ending: _____

Reason for Leaving: _____

SUPPLEMENTAL EMPLOYMENT INFORMATION

If you worked in any of your previous positions under another name, please give that name _____

Are you presently employed?

Yes No

If yes, may we contact your present employer?

Yes No

Have you ever been fired, or asked to resign, from a job? Yes No

If yes, please explain _____

Do you have a valid State Driver's License?

Yes

No

Do you have a working vehicle?

Yes

No

SPECIAL SKILLS

Have you had any computer/ window/excel experience or training? Yes No

If yes, please explain _____

What languages do you speak fluently? _____

Use the space below to describe why you are interested in working for our company and to list those skills and abilities which you feel particularly qualify you for a position with us. If you need more space, please continue on a separate sheet.

REFERENCES

Give three references, not relatives or former employers.

NAME	EMAIL ADDRESS	PHONE	OCCUPATION
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AFFIDAVIT

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge.

I hereby authorize the Company to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I have my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements.

I agree that, if I am employed, I will abide by all the rules and regulations of the Company. I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody in the Company is authorized to enter into any written or verbal employment contract with me for any definite period of time without the express written consent of the President of the Company. I also understand that my employment is "at-will" and may be terminated by me or by the Company at any time for any reason or no reason at all, with or without prior notice.

Signature _____

Date ____ / ____ / ____