



## APPLICATION FOR EMPLOYEMENT

Date \_\_\_\_\_ Social Security Number \_\_\_\_\_ Position applied for \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Birthdate \_\_\_\_\_

Is there a personal responsibility or problem which might prevent you from coming to work everyday? Yes or No

Have you any other income? Yes or No

Are you a U.S. Citizen? Yes or No

**Education:** High School Graduate? Yes or No

College Graduate? Yes or No

Years of College? \_\_\_\_\_

Degrees earned? \_\_\_\_\_

Other training or education \_\_\_\_\_

Branch of armed forces? \_\_\_\_\_ Length of duty? \_\_\_\_\_ Reserve status \_\_\_\_\_

Have you a friend or relative working here? \_\_\_\_\_

Have you applied for a position at our office before \_\_\_\_\_

### Physical Record:

Have you had major hospitalization or Doctor's care in the past 5 year? Yes or No

If yes for

whatailment? \_\_\_\_\_

Have you ever received treatment for a mental or nervous problem? Yes or No

If yes for what

ailment? \_\_\_\_\_

### Last Place Employed:

Name of

Employer \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employed from \_\_\_\_\_ to \_\_\_\_\_ Total time worked \_\_\_\_\_

Rate of pay start \$ \_\_\_\_\_ final \$ \_\_\_\_\_

Specify nature of work and skills acquired \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**Second to Last Place Employed:**

Name of Employer \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Employed from \_\_\_\_\_ to \_\_\_\_\_ Total time worked \_\_\_\_\_  
Rate of pay start \$ \_\_\_\_\_ final \$ \_\_\_\_\_  
Specify nature of work and skills acquired \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**Third to Last Place Employed:**

Name of Employer \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Employed from \_\_\_\_\_ to \_\_\_\_\_ Total time worked \_\_\_\_\_  
Specify nature of work and skills acquired \_\_\_\_\_  
Reason for leaving \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Give name and address of person to be notified in case of emergency:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date you can start \_\_\_\_\_ Salary required \_\_\_\_\_

I hereby make application for employment. These questions are being answered by me truthfully without reservation or concealment of facts. I agree if engaged to comply with the rules of the house and if asked will participate in a polygraph examination. It is understood and agreed that when my services terminate for any reason salary due will be prorated according to my weekly salary up to that time and paid on the next scheduled payroll day.

Signature \_\_\_\_\_

**Goals:**

Position desired: first choice \_\_\_\_\_ second choice \_\_\_\_\_  
What are your salary requirements per month? \_\_\_\_\_ Ultimate salary goal ? \_\_\_\_\_  
Why have you chosen our company for a career ? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any other experiences special skills or qualifications which you feel would especially fit you for work with this company ?

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

What has been your most interesting work ? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What has made it interesting to you ? \_\_\_\_\_

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What are your ambition in life ? \_\_\_\_\_

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Are you open to traveling away form home to attend continuing education seminars ? \_\_\_\_\_

Other information you may want to  
submit: \_\_\_\_\_

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