



PRE-EMPLOYMENT APPLICATION AN EQUAL OPPORTUNITY EMPLOYER

We greatly appreciate your interest in our organization, and assure you that applicants are considered for all positions without regard to race, color, sex, age, religion, national origin, disability, marital status or veteran status. Please note this application must be completed in its entirety and signed in order to be considered. Information submitted on this application is subject to verification. **Not valid as PEO Employee Agreement.**

PERSONAL INFORMATION

Date: ____/____/____ Phone #: (____) ____ - ____

Name: _____ Social Security #: ____ - ____ - ____
 Last First Middle Initial

Present Address: _____
 Street City State Zip How Long

Previous Address: _____
 Street City State Zip How Long

Previous Address: _____
 Street City State Zip How Long

Are you at least 18 years of age? Yes or No If No, please state your age: _____

Are you legally eligible for employment in the US? Yes or No

EMPLOYMENT INFORMATION

Position applying for: _____ Date available to start: ____/____/____

Type of Employment desired: Full Time Part Time Temporary Salary desired \$ ____ per _____

Are you willing to work over time, if required? Yes or No

Are there any shifts of hours which you cannot work? Yes or No If Yes, please identify: _____

Have you ever applied for a position with company before? Yes or No If Yes, When? _____

Have you ever been convicted of any crime other than a minor traffic violation? Yes or No

If Yes, state date and places where charges occurred (Note: answering "Yes" will not automatically disqualify you for employment.)

Have you taken any illegal drugs in the past thirty (30) days? Yes or No

Are you presently employed? Yes or No If Yes, may we contact your present employer? Yes or No

EDUCATION

	Name and Location Of School	Years Completed	Did You Graduate	Degree Earned
High School				
College				
Graduate School				
Trade, Business or Certificates				

EMPLOYMENT EXPERIENCE

Please give accurate, complete full and part time employment record. Start with your present or most recent employer.

Company Name:	Phone Number: () _____ - _____
Address:	Employed From: _____ To: _____
Name of Supervisor:	Salary/Wages Start _____ Finish _____
State Job Title and Responsibilities:	Reason for Separation:

Company Name:	Phone Number: () _____ - _____
Address:	Employed From: _____ To: _____
Name of Supervisor:	Salary/Wages Start _____ Finish _____
State Job Title and Responsibilities:	Reason for Separation:

Company Name:	Phone Number: () _____ - _____
Address:	Employed From: _____ To: _____
Name of Supervisor:	Salary/Wages Start _____ Finish _____
State Job Title and Responsibilities:	Reason for Separation:

Note that the employers listed above will be contacted unless the applicant indicates differently. Are there any employers above whom you do not wish us to contact? () Yes or () No If Yes, please indicate employer and reason: _____

REFERENCES

List below the names of three (3) persons, not related to you, whom you have known for at least one (1) year:

Name	Address & Telephone Number	Business	Years Known

I hereby reaffirm that I have read the foregoing questions and that my answers to them are true and correct and that I have not misrepresented or withheld any further information. I understand that falsification of this information may cause for immediate dismissal. I further acknowledge that my employment may be terminated, and any offer of employment may be withdrawn without prior notice at any time by the company.. I also understand that my employment is at will. This means that I am free to terminate my employment at any time, for any reason, and the company retains the same right. I understand that any offer of employment may be contingent upon background investigation, which may include credit, criminal, motor vehicle or previous employment. I hereby authorize all references and former employers listed on my employment application to give the company any and all information concerning my previous employment and any pertinent information they might have, personal or otherwise, and release all parties from any claims, causes of action, or liability from damages that may or could result in furnishing such information to the company.

Signature of Applicant

Date