

Unit 2: Applications and Resumes

Name: _____ Class: _____ Date: _____

APPLICATION FOR EMPLOYMENT

Instructions: Please read and answer the following questions. Except for your signature, PRINT your responses. None of the questions is intended to imply discrimination or illegal preferences upon non-job-related information.

Today' Date:					
General Information					
Name (Last, First, Middle):					
Address (Number and Street):					
City, State, Zip Code:					
Telephone Number:			Social Security Number:		
Are you 18 years of age or older?	Yes	No	If no, what age are you?		
Are you a legal U.S. resident or do you have a work visa?				Yes	No
Have you ever applied to our company/organization before?				Yes	No
Have you ever been employed by our company/organization in the past?				Yes	No
Type of Employment					
Position:					
How were you referred to our company/organization?					
Work Status:	Full Time		Part Time		Temporary
Date you could start working:					
Education					
Type of School	Name and Location of School	Number of Years Completed	Major	Diploma, Degree, Certificate	Grade Point Average
High School/GED					
Vocational/Technical					
College/University					
Other:					
Special Skills and Qualifications					
List <i>related</i> interests, activities, honors, and awards:					

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APPLICATION FOR EMPLOYMENT (CONTINUED)

Work History (including related volunteer experience)			
Name of Employer:			
Address (Number and Street):			
City, State, Zip Code:			
Telephone Number:			
Position:		Supervisor's Name:	
Employment Dates:			
Duties:			
Starting Wage:		Ending Wage:	
Reason for Leaving:			
May we contact this employer?	Yes	No	If no, please explain:

Name of Employer:			
Address (Number and Street):			
City, State, Zip Code:			
Telephone Number:			
Position:		Supervisor's Name:	
Employment Dates:			
Duties:			
Starting Wage:		Ending Wage:	
Reason for Leaving:			
May we contact this employer?	Yes	No	If no, please explain:

Name of Employer:			
Address (Number and Street):			
City, State, Zip Code:			
Telephone Number:			
Position:		Supervisor's Name:	
Employment Dates:			
Duties:			
Starting Wage:		Ending Wage:	
Reason for Leaving:			
May we contact this employer?	Yes	No	If no, please explain:

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APPLICATION FOR EMPLOYMENT (CONTINUED)

References	
Name:	
Address (Number and Street):	
City, State, Zip Code:	
Telephone Number:	Relationship:
Occupation/Title:	

Name:	
Address (Number and Street):	
City, State, Zip Code:	
Telephone Number:	Relationship:
Occupation/Title:	

Name:	
Address (Number and Street):	
City, State, Zip Code:	
Telephone Number:	Relationship:
Occupation/Title:	

Acknowledgement

Please read carefully before signing.

I declare each of the answers I have given in this application for employment to be complete and true to the best of my knowledge. I understand any false information or omissions may disqualify me from further consideration for employment and may result in my discharge if discovered at a later date.

I authorize the investigation of all statements contained in this application, and I authorize any person, school, current employer (unless otherwise noted), past employers, and other organizations named in this application to provide relevant information which may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand that this application or subsequent employment does not create a guarantee of employment for any definite period of time. Further, I understand that my employment is "at will" and can be terminated by either me or the company at any time for any reason or for no reason.

I have read, understand, and by my signature agree to the above statements.

Applicant Signature

Date