



APPLICATION FOR EMPLOYMENT  
PRE-EMPLOYMENT QUESTIONNAIRE (AN EQUAL OPPORTUNITY EMPLOYER)

**PERSONAL INFORMATION**

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
LAST FIRST MIDDLE

HOME PHONE: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP

HOW LONG AT PRESENT ADDRESS? \_\_\_\_\_

ARE YOU 18 YEARS OR OLDER? YES NO

DO YOU HAVE A VALID DRIVERS LICENSE? YES NO

LICENSE # AND STATE OF ISSUE: \_\_\_\_\_

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY  
BECAUSE OF VISA OR IMMIGRATION STATUS? YES NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME IN THE PAST 10 YEARS? YES NO

IF YES, LIST CONVICTIONS: \_\_\_\_\_

**EMPLOYMENT DESIRED**

POSITION APPLYING FOR: \_\_\_\_\_

DATE YOU CAN START: \_\_\_\_\_ SALARY DESIRED: \_\_\_\_\_

ARE YOU EMPLOYED NOW? IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER?

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE?

LIST ANY FRIENDS /RELATIVES WORKING WITH US NOW: \_\_\_\_\_

LIST ANY SPECIAL SKILLS YOU HAVE FOR POSITIONS APPLIED FOR ABOVE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FORMER EMPLOYERS (LIST LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)**

EMPLOYER	POSITION HELD	DATES	SALARY UPON LEAVING	REASON FOR LEAVING

**U.S. MILITARY OR NAVAL SERVICE:** \_\_\_\_\_

**EDUCATION**

NAME AND LOCATION OF SCHOOL

NUMBER OF YEARS ATTENDED

GRAMMAR SCHOOL		
HIGH SCHOOL		
COLLEGE		
TRADE OR BUSINESS SCHOOL		

DID YOU GRADUATE? YES \_\_\_\_\_ NO \_\_\_\_\_

SUBJECTS STUDIED: \_\_\_\_\_  
 \_\_\_\_\_

**REFERENCES**

GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN FOR AT LEAST 1 YEAR

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

**IN CASE OF EMERGENCY NOTIFY:**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ DAY TIME PHONE: \_\_\_\_\_

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE. I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATIONS MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_