



Application For Employment

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

Personal Information

Name (Last, First, Middle) _____

Present Address _____

Permanent Address _____

Phone Number _____ Are you 18 Years or Older? Yes No

Email Address _____ Social Security Number _____

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? Yes No

Employment Desired

Position _____ Date you can start _____ Salary Desired _____

Are you employed now? Yes No If so, may we inquire of your present employer? Yes No

Ever applied to this company before? Yes No Where? _____ When? _____

Referred by _____

Education	Name and Location of School	No. of Years Attended	Did you Graduate	Subjects Studied
Grammer School				
High School				
College				
Trade, Business or Correspondence School				

General

Subjects of Special Study or Research Work _____

Special Skills _____

Activities (Civic, Athletic, etc.) _____

US Military or Naval Service _____ Rank _____

Present Membership in National Guard or Reserves _____

Last/First/Middle

Former Employers (List below the last three employers, starting with the last one first)

Date (Month/Year)	Name and Address of Employer	Salary	Position	Reason for Leaving
From _____ To _____				
From _____ To _____				
From _____ To _____				
From _____ To _____				

Which of these jobs did you like the best? _____

What did you like most about this job? _____

References Give the names of three persons not related to you whom you have known at least one year.

Name	Address	Business	Years Acquainted
1			
2			
3			

THE FOLLOWING STATEMENT APPLIES IN MARYLAND & MASSACHUSETTS. (FILL IN NAME OF STATE.)

IT IS UNLAWFUL IN THE STATE OF _____ TO REQUIRE OR ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

SIGNATURE OF APPLICANT _____

IN CASE OF EMERGENCY, NOTIFY (NAME/ADDRESS/PHONE) _____

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION 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 COMPENSTION 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 CONDIONS OF MY EMPLOYEMNT 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 THAN ONLY WHEN IN WRONG AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIAL PERIOS OF TIME OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

DATE _____ SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

Interviewed by _____ Date _____

Remarks _____

Neatness _____ Ability _____

Hired: Yes No Position _____ Department _____

Salary/Wage _____ Date Reporting to Work _____

Approved (Employment Manager) _____

(Dept Head) _____ (General Manager) _____

Return Completed Application To: PO Box 144, Arcadia, WI 54612