

APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE
EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

DATE _____

| | | | |
|------------------------|-------------------|---------------------------|----------|
| NAME (LAST NAME FIRST) | | SOCIAL SECURITY NO. _____ | |
| PRESENT ADDRESS | CITY | STATE | ZIP CODE |
| PERMANENT ADDRESS | CITY | STATE | ZIP CODE |
| PHONE NO. () | REFERRED BY _____ | | |

EMPLOYMENT DESIRED

| | | |
|---|--|--|
| POSITION | DATE YOU CAN START | SALARY DESIRED |
| ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO | ARE YOU LEGALLY AUTHORIZED TO WORK IN THE US? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO | WHERE? | WHEN? |

EDUCATION HISTORY

| NAME & LOCATION OF SCHOOL | YEARS ATTENDED | DID YOU GRADUATE? | SUBJECTS STUDIED |
|--|----------------|-------------------|------------------|
| HIGH SCHOOL | | | |
| COLLEGE | | | |
| TRADE, BUSINESS OR CORRESPONDENCE SCHOOL | | | |

GENERAL INFORMATION

| | |
|---|------|
| SUBJECTS OF SPECIAL STUDY/RESEARCH WORK | |
| SPECIAL TRAINING | |
| SPECIAL SKILLS | |
| U.S. MILITARY OR NAVAL SERVICE | RANK |

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

| DATE MONTH AND YEAR | NAME & ADDRESS OF EMPLOYER | SALARY | POSITION | REASON FOR LEAVING |
|---------------------|----------------------------|--------|----------|--------------------|
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |
| FROM | | | | |
| TO | | | | |