



Employment Application

Applicant Information

Last Name	First	M.I.	Date		
Street Address				Apartment/Unit #	
City	State	ZIP			
Phone	E-mail Address				
Date Available	Social Security No.	Desired Salary	\$		
Position Applied for					
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Do you have any physical disabilities that would preclude you from performing the work for which you are considered?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		

***** DRIVER POSITIONS HAVE A MINIMUM LIFTING REQUIREMENT OF 50 LBS**

Education

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

References

Please list three professional references.

Full Name	Relationship		
Company	Phone		
Address			
Full Name	Relationship		
Company	Phone		
Address			
Full Name	Relationship		
Company	Phone		
Address			

Previous Employment

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Military Service

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date