EMPLOYMENT APPLICATION

	al Informatio				Date of application//					
Name (First)			(Middle)			(Last)				
Home Address City			State			Zip Code				
Home Telephone				Business Telephone			May we contact you at work? (<i>Please circle</i>) YES NO			
Position	applying for:					_				
Are you 21 or over? (circle one) YES			NO							
Date available to start: Are you interested in (Circle all that apply):			Full	l-time F	Part-time	Summer	Weekdays	Wee	kends	
_			DAY	MON	TUES	WED	THURS	FRI	SAT	SUN
	Days & hours are available		FROM		1020	1125	exe	11	0711	John
			то							
Type o		Nama	9 Ionation		Dogr	oo/oroo	Number of		Graduated	
Schoo		Name & location of school			Degree/area of study		Years attended		(Circle One)	
	Name				1					
HIGH SCHOO		City State Zip							YES	NO
	Name		Address						VEC	NO
COLLEG	GE City	State	Zip		1				YES	NO
GRADUA [*] SCHOO	1								YES	NO
	City	State	Zip							
0.711.5	Name		Address						YES	NO
OTHER	City	State	Zip		1				0	
U.S. Military Service							Danis Attains d			
Branch of Service				Technical Specialization			Rank Attained			
Special	<i>I Skills</i> (Typir	ng, PC Soft	ware, PC Hai	dware, etc	.)					
Legal										
	U.S. Citizen? (circle one)	YES	NO						
Have you ever been convicted of a crime other than a mir				inor traffic vio	lation? (circle	one). If yes,	YES please explain.	NO	YES	NO
Do you have any type of medical condition that may prev				ent you from working? (cirlce one). If yes			, please explain		YES	S NO

(Please go to page 2)

Employment History

List employment starting with your most **recent** position. Account for any time during this period that you were unemployed by stating the nature of your activities. Please indicate if you were employed under a different name. Please list relevant experience only.

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Dates	From:		To:	Name of co	ompany:			_
Address:								_
Phone:	()				Supervisor:			_
Your position	on title:							
Salary or wages:		Starting:		Final:				
Reason for	leaving:							
Dates	From:		To:	Name of co	ompany:			-
Address:								_
Phone:	()				Supervisor:			_
Your position	on title:							
Salary or v	wages:	Starting:		Final:				
Reason for	· leaving·							
Dates	From:		To:	Name of co	ompany:			
Address:					· · · <u>-</u>			-
Phone:	()				Supervisor:			-
Your position	on title:							-
Salary or wages:		Starting:		Final:				
Reason for	· leaving:							
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Phone:	()				Supervisor:			-
Your position								
Salary or wages:		Starting:		Final:				
Reason for								
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N	ame		Address		Phone Nu	mber	Title	Yrs known
Please rea	nd carefully k	hefore signi	ina		ļ			I .
In submitting previous enfurnish it to information dismissal.	ng this applicati nployment, ger Characters up . In the event of I understand a	on for employ neral reputation on request and of employment and agree that	ment, I understand that an in, educational background d I release anyone so auth it, I understand that false of if employed, the employme	, credit record ar orized from all lia r misleading info ent will be "at will	nd/or criminal histo ability and damage rmation given in m '. That is, either I o	ry. I authori s whatsoeve y application or Characte	on is obtained regarding my ze anyone possessing this i er in furnishing, obtaining or nor interview(s) may result in rs may end the employment lent and that this application	nformation to using said n immediate relationship
Applicant's Signature							Date Signed	_