

COMPANY OR EMPLOYER NAME: _____

POSITION APPLIED FOR: _____

APPLICANT TELEPHONE: _____

SOCIAL SECURITY NUMBER: _____

Employment Application

YOUR NAME: _____
Last First Middle

ADDRESS: _____

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.A.?

Yes No (If yes, verification will be required.)

I AM SEEKING A PERMANENT POSITION: Yes No

IF NECESSARY FOR THE JOB I AM ABLE TO:

Are you able to perform the essential functions of the position with or without accommodations?

Yes No

Work (which shifts)? _____

Work overtime? _____

Provide a valid Alaska Drivers License? _____

IF NECESSARY FOR THE JOB, ARE YOU OVER (Please mark one) 14__ 15__ 16__ 18__ 19__ 21__

I WILL BE ABLE TO REPORT TO WORK ____ DAYS AFTER BEING NOTIFIED THAT I AM HIRED.

EDUCATION:	Yrs. Completed	Field of Study	Graduate or Degree
High School _____			
College/University _____			
Business/Technical _____			
Other (May include grammar school) _____			

MILITARY SERVICE: Yes No

Duty/Specialized Training: _____

REFERENCES: List two personal references who are not relatives or former supervisors.

Name	Address	Telephone	Occupation	Years known
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

EMPLOYMENT: List last employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary (following this section), or use an extra sheet of paper if necessary.

Employer Name and Address	Position Title/Duties Skills	Dates Employed from _____ to _____
_____	_____	Reason for leaving
_____		Supervisor's Name: _____ Telephone: _____

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_____	_____	Reason for leaving
_____		Supervisor's Name: _____ Telephone: _____

EMPLOYMENT APPLICATION QUESTIONS

Have you ever been convicted of any crime? If yes, explain as you feel necessary.

Circle days of the week that you are available to work: Sun, Mon, Tue, Wed, Thur, Fri, Sat

Circle all acceptable types of employment: Full Time Part Time Hourly Wage Straight Commission

Do you foresee having any attendance problems? _____

Can you pick up a 50 lb. box from the ground and carry it one hundred feet without violating any medical recommendations? _____

Can you speak/write any languages other than English: _____

Have you worked under a nickname or different name for another company? _____

Are you legally authorized to work in the U.S.? _____

Do you have a valid Florida Driver's License? _____. Do you have reliable transportation? _____

Can you use a computer? _____. List any software you are familiar with: _____

Tell us about previous work responsibilities: _____

What interests you about this position? _____

What type of sales experience do you have, if any? _____

What are your greatest employment weaknesses? _____

Do you prefer to work independently or on a team, why? _____

Do you have an objection to any of the following:
criminal background check _____, credit check _____, references check _____

You can tell us about any other information you feel is important for us to consider:
