

# APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

## PERSONAL INFORMATION

DATE \_\_\_\_\_

NAME

SOCIAL SECURITY NUMBER

LAST FIRST MIDDLE

PRESENT ADDRESS

STREET CITY STATE ZIP

PERMANENT ADDRESS

STREET CITY STATE ZIP

PHONE NO.

ARE YOU 18 YEARS OR OLDER? Yes  No

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?

IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?

EVER APPLIED TO THIS COMPANY BEFORE?

WHERE?

WHEN?

REFERRED BY

### EDUCATION

NAME AND LOCATION OF SCHOOL

\*NO OF YEARS ATTENDED

\*DID YOU GRADUATE?

SUBJECTS STUDIED

GRAMMAR SCHOOL

HIGH SCHOOL

COLLEGE

TRADE, BUSINESS OR CORRESPONDENCE SCHOOL

## GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

SPECIAL SKILLS

ACTIVITIES: (CIVIC, ATHLETIC, ETC.)

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS.

U.S. MILITARY OR NAVAL SERVICE

RANK

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

\*This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26, 1991.