APPLICATION FOR EMPLOYMENT

(Pre-Employment Questionnaire)   (An Equal Opportunity Employer)

A. PERSONAL INFORMATION

DATE **11-6-XX**

SOCIAL SECURITY NUMBER **000-00-0000**

NAME **Hired** (LAST) **Robert** (FIRST) **Brian** (MIDDLE)

PRESENT ADDRESS **37 Main Street** (STREET) **Anytown** (CITY) **Utah** (STATE) **55555** (ZIP)

PERMANENT ADDRESS **37 Main Street** (STREET) **Anytown** (CITY) **Utah** (STATE) **55555** (ZIP)

PHONE NO. **(555) 555-0000**   ARE YOU 18 YEARS OR OLDER? ☒ YES ☐ NO

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? ☒ YES ☐ NO

B. EMPLOYMENT DESIRED

POSITION **Security**   DATE YOU CAN START **immediately**   SALARY DESIRED **open**

ARE YOU EMPLOYED NOW? **yes**   IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? **yes**

EVER APPLIED TO THIS COMPANY BEFORE? **no** WHERE? **—**   WHEN? **—**

REFERRED BY **Mr. George Ward**

C. EDUCATION	NAME AND LOCATION OF SCHOOL		NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL	Main Street Elem. Anytown, UT	Town Center Middle School Anytown, UT	9 yrs. (gr. K-8th)	yes	general
HIGH SCHOOL	Center High School Anytown, UT		2 yrs. (gr. 9th-10th)	will graduate 6/xx	general
COLLEGE	n/a		—	—	—
TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL	County J.V.S. Anytown, UT		2 yrs. (gr. 11th-12th)	will graduate 6/xx	Criminal Justice

D. GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK **Senior in a two-year vocational Criminal Justice program. Receiving over 1500 hours of hands-on training.**

SPECIAL SKILLS **Certified in CPR. Trained in patrolling, dispatching, radio ✳**

ACTIVITIES (CIVIC, ATHLETIC, ETC.) **Vocational Industrial Clubs of America (2 years)**

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 **n/a**   RANK **—**   PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES **—**

✳ **communications, arrest procedures, self-defense, and computer operations.**

(continued)

E. FORMER EMPLOYERS. LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST.

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM 6-XX / TO present	IGA 300 West St., Nearby, UT	5\frac{15}{}$	customer service	n/a
FROM 11-XX / TO 6-XX	McDonald's 1005 East St., Local, UT	4\frac{75}{}$	crew member	scheduling
FROM 5-XX / TO 9-XX	The Smith Family 919 Park St., Local, UT	15\frac{00}{}$	lawn care	seasonal
FROM / TO				

F. REFERENCES. GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	PHONE NUMBER	BUSINESS	YEARS ACQUAINTED
1. Mr. George Ward	(555) 555-2222	Vocational Instructor at County J.V.S.	2
2. Mr. John Rocklin	(555) 555-3333	Retired GM worker	3
3. Mrs. Susan Hughes	(555) 555-4444	Manager at McDonald's	1 1/2

G. PHYSICAL RECORD

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED? ☐ YES ☒ NO   IF YES, WHAT CAN BE DONE TO ACCOMMODATE YOUR LIMITATION?

n/a

IN CASE OF EMERGENCY, NOTIFY Grace Hired   37 Main Street Anytown, UT 55555   (555) 555-0000
NAME (mother)   ADDRESS   PHONE NO.

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE."

DATE 11-6-XX   SIGNATURE Robert B. Hired

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY _____   DATE _____

_____

_____

HIRED ☐ YES ☐ NO   POSITION _____ DEPT. _____

SALARY/WAGE _____ DATE REPORTING TO WORK _____

APPROVED: 1. _____ 2. _____ 3. _____
EMPLOYMENT MANAGER   DEPT. HEAD   GENERAL MANAGER