

# APPLICATION FOR EMPLOYMENT

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

DATE: \_\_\_\_\_

## PERSONAL INFORMATION

NAME: \_\_\_\_\_ SSN: \_\_\_\_\_  
LAST FIRST MIDDLE

ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP

ARE YOU 18 YEARS OR OLDER?  YES  NO PHONE NO: \_\_\_\_\_ APARTMENT NO: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_  
NAME ADDRESS PHONE NO

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS?  YES

## 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? \_\_\_\_\_

EVER WORKED FOR THIS COMPANY BEFORE? \_\_\_\_\_ WHERE? \_\_\_\_\_ WHEN? \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

NAME OF LAST SUPERVISOR AT THIS COMPANY: \_\_\_\_\_

WHO REFERRED YOU TO THIS COMPANY?  EMPLOYMENT AGENCY  NEWSPAPER ADVERTISEMENT  OTHER

STATE EMPLOYMENT OFFICE  COLLEGE PLACEMENT SERVICE  WALKED IN  FRIEND

## EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	*NO. OF YEARS ATTENDED	*DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE BUSINESS OR CORRESPONDENCE SCHOOL				

SUBJECT OF SPECIAL STUDY OR RESEARCH: \_\_\_\_\_

SPECIAL TRAINING: \_\_\_\_\_

SPECIAL SKILLS: \_\_\_\_\_

**FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)**

NAME AND ADDRESS OF PRESENT EMPLOYER: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ LEAVING DATE: \_\_\_\_\_  
MONTH YEAR MONTH YEAR

WEEKLY STARTING SALARY: \_\_\_\_\_ WEEKLY FINAL SALARY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ MAY WE CONTACT YOUR SUPERVISOR? \_\_\_\_\_

NAME AND TITLE OF SUPERVISOR: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

DESCRIPTION OF WORK: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

NAME AND ADDRESS OF PRESENT EMPLOYER: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ LEAVING DATE: \_\_\_\_\_  
MONTH YEAR MONTH YEAR

WEEKLY STARTING SALARY: \_\_\_\_\_ WEEKLY FINAL SALARY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ MAY WE CONTACT YOUR SUPERVISOR? \_\_\_\_\_

NAME AND TITLE OF SUPERVISOR: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

DESCRIPTION OF WORK: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

NAME AND ADDRESS OF PRESENT EMPLOYER: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ LEAVING DATE: \_\_\_\_\_  
MONTH YEAR MONTH YEAR

WEEKLY STARTING SALARY: \_\_\_\_\_ WEEKLY FINAL SALARY: \_\_\_\_\_

JOB TITLE: \_\_\_\_\_ MAY WE CONTACT YOUR SUPERVISOR? \_\_\_\_\_

NAME AND TITLE OF SUPERVISOR: \_\_\_\_\_ PHONE NO: \_\_\_\_\_

DESCRIPTION OF WORK: \_\_\_\_\_ REASON FOR LEAVING: \_\_\_\_\_

**REFERENCES (GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST A YEAR)**

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

**SERVICE RECORD**

BRANCH OF SERVICE: \_\_\_\_\_ DISCHARGE DATE RANK: \_\_\_\_\_

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES: \_\_\_\_\_ DATE OBLIGATION ENDS: \_\_\_\_\_

## SPECIAL QUESTIONS

DO NOT ANSWER ANY OF THESE QUESTIONS IN THIS FRAMED AREA UNLESS THE EMPLOYER HAS CHECKED  A BOX PROCEEDING A QUESTION. THEREBY INDICATING THAT THE INFORMATION REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION, OR DICTATED BY NATIONAL SECURITY LAWS, OR IS NEEDED FOR OTHER LEGALLY PERMISSIBLE REASONS.

HEIGHT \_\_\_\_\_ FEET \_\_\_\_\_ INCHES       ARE YOU A U.S. CITIZEN? \_\_\_\_\_ YES \_\_\_\_\_ NO

ARE YOU ABLE TO PERFORM EACH OF THE FOLLOWING JOB FUNCTIONS WITH OR WITHOUT AN ACCOMODATION?

■ JOB FUNCTION 1: \_\_\_\_\_ YES \_\_\_\_\_ NO

IF YOU CAN PERFORM THE FUNCTION WITH AN ACCOMMODATION, EXPLAIN HOW YOU WILL PERFORM THE TASKS, AND WHAT ACCOMMODATION? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

■ JOB FUNCTION 2: \_\_\_\_\_ YES \_\_\_\_\_ NO

IF YOU CAN PERFORM THE FUNCTION WITH AN ACCOMMODATION, EXPLAIN HOW YOU WILL PERFORM THE TASKS, AND WHAT ACCOMMODATION? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WERE YOU EVER SERIOUSLY INJURED? \_\_\_\_\_ YES, \_\_\_\_\_ NO GIVE DETAILS \_\_\_\_\_

WHAT FOREIGN LANGUAGES DO YOU SPEAK FLUENTLY? \_\_\_\_\_ READ \_\_\_\_\_ WRITE

HAVE YOU BEEN CONVICTED OF A FELONY OR MISDOMEANOR WITHIN THE LAST 5 YEARS?

\_\_\_\_\_ YES \_\_\_\_\_ NO DESCRIBE \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I UNDERSTAND AND AGREE THAT I MAY BE REQUIRED TO TAKE ONE OR MORE  PHYSICAL EXAMINATION:  LIE DETECTOR TEST(S) AS A CONDITION OF HIRING OR CONTINUED EMPLOYMENT. I AGREE TO CONSENT TO TAKE SUCH TEST(S) AT SUCH TIME AS DESIGNATED BY THE COMPANY AND TO RELEASE THE COMPANY, ITS DIRECTORS, OFFICERS, AGENTS OR EMPLOYEES FROM ANY CLAIM ARISING IN CONNECTION WITH THE USE OF SUCH TEST(S) \_\_\_\_\_ YES \_\_\_\_\_ NO

I HAVE BEEN ADVISED THAT LIE DETECTOR TESTS, AS A CONDITION OF HIRING OR CONTINUED EMPLOYMENT ARE PROHIBITED BY LAW.

\*YOU WILL NOT BE DENIED EMPLOYMENT SOLELY BECAUSE OF A CONVICTION RECORD, UNLESS THE OFFENSE IS RELATED TO THE JOB FOR WHICH YOU HAVE APPLIED.

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITION OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN ITS PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

DATE: \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**DO NOT WRITE ON THIS PAGE**

**FOR INTERVIEWER'S USE**



INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

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NEATNESS		CHARACTER	
PERSONALITY		ABILITY	



INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

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NEATNESS		CHARACTER	
PERSONALITY		ABILITY	



INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

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NEATNESS		CHARACTER	
PERSONALITY		ABILITY	



HIRED: \_\_\_\_\_ FOR DEPT: \_\_\_\_\_ POSITION: \_\_\_\_\_

SALARY WAGES: \_\_\_\_\_ WILL REPORT: \_\_\_\_\_

APPROVED: 1. \_\_\_\_\_  
EMPLOYMENT MANAGER DATE

APPROVED: 2. \_\_\_\_\_  
DEPARTMENT MANAGER DATE

APPROVED: 3. \_\_\_\_\_  
GENERAL MANAGER DATE