



PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

APPLICATION FOR EMPLOYMENT

Do you have a driver's license? _____ Yes _____ No

What is your means of transportation to work? _____

Driver's license number _____ State of issue _____

Operator _____ Commercial (CDL) _____ Chauffeur _____

Expiration date _____

Have you had any accidents during the past three years? _____ How many? _____

Have you had any moving violations during the past three years? _____ How many? _____

OFFICE ONLY

Typing _____ Yes	10-key _____ Yes	Word Processing _____ Yes
_____ No	_____ No	_____ No
_____ WPM		_____ WPM

Personal Computer _____ Yes	PC _____	Other _____
_____ No	Mac _____	Skills _____

Please list two references other than relatives or previous employers.

Name _____	Name _____
Postion _____	Postion _____
Company _____	Company _____
Address _____	Address _____
Telephone _____	Telephone _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.



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	MILITARY
Have you ever been in the armed forces?	_____ Yes _____ No
Are you now a member of the National Guard?	_____ Yes _____ No
Specialty _____	Date Entered _____ Discharge Date _____

Work Experience Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer Address City, State, Zip Telephone	Name of last supervisor	Employment dates	Pay or Salary
		From To	Start Final
	Your last job title		

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company

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May we contact your present employer? _____ Yes _____ No
 Did you complete this application yourself? _____ Yes _____ No
 If not, who did? _____

Signature Date