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

PERSONAL INFORMATION

NAME

DATE_____________________

SOCIAL SECURITY

NUMBER

LAST       FIRST       MIDDLE

PRESENT ADDRESS______________________________

PERMANENT ADDRESS______________________________

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__________________

IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?

ARE YOU EMPLOYED NOW? Yes □ No □

EVER APPLIED TO THIS COMPANY BEFORE? WHERE? WHEN?

REFERRED BY__________________

EDUCATION

NAME & LOCATION OF SCHOOL__________________

No. of Years

Did you graduate?

SUBJECTS STUDIED

GRAMMAR SCHOOL

HIGH SCHOOL

COLLEGE

TRADE, BUSINESS OR CORRESPONDENCE

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 national origin of its members)

U.S. MILITARY OR NAVAL SERVICE RANK ____________________

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

This form complies with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guideline promulgated by the EEOC on July 26, 1991.

(CONTINUED ON OTHER SIDE)
# Former Employers

<table>
<thead>
<tr>
<th>DATE: MONTH &amp; YR</th>
<th>NAME &amp; ADDRESS OF EMPLOYER</th>
<th>PHONE NUMBER</th>
<th>SALARY</th>
<th>POSITION</th>
<th>REASON FOR LEAVING</th>
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Which of these jobs did you like best?

What did you like most about this job?

# Other Certifications & Education

(Copies of certifications may be requested at time of your interview)

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<th>TITLE OF CERTIFICATION</th>
<th>DATE CERTIFIED</th>
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# References:

Give the names of three persons not related to you whom you have known at least one year.

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<tr>
<th>NAME</th>
<th>ADDRESS</th>
<th>PHONE NUMBER</th>
<th>YEARS ACQUAINTED</th>
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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 conditions 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