

Position applied	d for:				
Name		Sc	ocial Security	ı #	
LAST	FIRST	MIDDLE	-		
Present Addres	S				
	NUMBER	STREE	ΞT.		
	CITY	STATE	E	ZIP	
Permanent Ad	dress				
(IF DIFFERENT FROM ABO	OVE) NUMBER	STREE	T		
	CITY	STATE	<u>-</u>	ZIP	
Telephone:		Date of Io If not, do yo	Birth:		
Do you have a	valid driver's lic	ense? Yes / No Lice			
				):	
5		of a felony? Yes			
If yes, please p	rovide date and	I nature of the offe	nse:		
5 5	•	rtation? Yes / No			
If available for		c, indicate the shore	• •	would accept:	
Part Time	Full Tim	ne Sea	sonal		
\//hat liaamaaa		SKILLS/HEAL			d a r a d O
what licenses,	skills, or qualine	ations do you poss	sess which sr	nould be consi	dered?
	any physical (	andicans disease		disability tha	t should bo
-		nandicaps, disease ork? Yes / No		uisability tha	
	explain:				
J 1		ur health for the pa		 ^?	
	-	-	-		
-		's Compensation for	J Injunes In	the past two y	jears, please
explain:					
		EDUCATIO			/ / NI
		Did you gra			
		give date when yo			
		equivalency certific			
Name of Schoo	l or College	Date of diploma	Froi	m – Io	
Major		Date of diplomatic	i, degree, lic	enses	
years of pool/s	pa experience, i	if any			

## REFERENCES

Name and Occupation	Phone #	Address
W	ORK EXPERIENCE	
vyour present employer be conta	acted? Yes / No	
jobs starting with the present ar		
Name and address of employer:		
From: To:	Name of supervisor.	
From: To: Describe the work you did:		
From: To: Describe the work you did:		
Describe the work you did:		
Describe the work you did: Reason for leaving:		
Describe the work you did: Reason for leaving: Starting salary: \$	Leaving salary: \$	
Describe the work you did: Reason for leaving:	Leaving salary: \$	
Describe the work you did: Reason for leaving: Starting salary: \$ Phone: Name and address of employer:	Leaving salary: \$	
Describe the work you did: Reason for leaving: Starting salary: \$ Phone:	Leaving salary: \$  Name of supervisor:	
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Describe the work you did: Reason for leaving: Starting salary: \$ Phone: Name and address of employer: Name and address of employer: From: To: Poscribe the work you did: Reason for leaving: Starting salary: \$	Leaving salary: \$ Name of supervisor: Leaving salary: \$	

THE STATEMENTS MADE BY ME IN THIS APPLICATION ARE FULL AND TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF; AND I AUTHORIZE THE RELEASE OF A BACKGROUND CHECK FROM THE APPLICABLE POLICE DEPARTMENT AND A DRIVING RECORD FROM DMV.

Signature \_\_\_\_\_ Date\_\_\_\_\_

## NUMBER THE ITEMS BELOW FROM ONE TO TEN, ONE BEING THE MOST IMPORTANT TO YOU, AND TEN THE LEAST IMPORTANT.

\_\_\_\_\_ Appreciation of good work

\_\_\_\_\_ Possibility for promotion

\_\_\_\_\_ Feeling 'in' on things

\_\_\_\_\_ Job security

\_\_\_\_\_ Help with personal problems

\_\_\_\_ Good wages

\_\_\_\_\_ Interesting work

\_\_\_\_\_ Loyalty of management to workers

\_\_\_\_\_ Tactful discipline

\_\_\_\_\_ Good working conditions