



Full Name _____ Phone # _____

Present Permanent Address _____

Date Available _____ Salary Expected _____/hour Date of Birth (Insurance Purposes Only) _____

Are you now employed? _____ If so, may we inquire of your present employer? _____

ALL DRIVERS LICENSES HELD LAST 3 YEARS	STATE	LICENSE NO.	ANY ACCIDENTS/VIOLATIONS	IF SO HOW MANY?

EDUCATION	NAME OF SCHOOL	CITY, STATE	GRADUATE OR DEGREE?
HIGH SCHOOL			
COLLEGE/ UNIVERSITY			
BUSINESS/ TECHNICAL			
OTHER			

Would you take a pre-employment drug test? _____ Have you ever been convicted of a felony? _____

Have you ever been convicted of a misdemeanor which resulted in imprisonment within the last two (2) years? _____

PREVIOUS EMPLOYMENT

EMPLOYERS (List last one first)	ADDRESS PHONE NUMBER	POSITION	EMPLOYED FROM-TO	REASON FOR LEAVING
	()			
	()			

APPLICANT - READ AND SIGN BEFORE SUBMITTING THIS APPLICATION:

I authorize the employer or his agents to investigate my background and motor vehicle driving record to ascertain any and all information of concern to my record, whether same is of record or not, and release employers and persons named herein from all liability of any damages on account of his furnishing such information. I understand that misrepresentation or omission of facts called for on this employment application will, if hired, result in discharge. Labor Code 1991 states that employment, having no specified term, may be terminated at will by either party. The employer adheres to this section of the Labor Code and hereby puts the applicant on notice that all employment offered by the employer may be terminated at the will of either party with or without cause. I certify that this application was completed by me and that all entries on it and information on it are true and complete. Furthermore, I have read and understand all of the conditions upon which this offer of employment is made.

Date _____ Signature _____