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Name:		I	Date:	
	Last First	Middle		
Address:				
Street		Apartment/Ur	Apartment/Unit#	
	City	State	Zip Code	
Phone:	one: Social Security No.:			
Are you under 18 years of age?		☐ Yes ☐ No If yes, list be	irth date:	
Are you authorized to work in the United States?		tes?		
Have you ever worked for this company before?		ore?	n?	
Have you ever been convicted of a felony?		□ Yes □ No		
If yes, expla	in:			
Position Applying for:		Full or Part Time	:	
Date Available:		Desired Salary:		
Please indica	ate the days and hours that you w	ould be available to work:		
Monday	□ Yes □ No Hours:			
Tuesday	☐ Yes ☐ No Hours:			
	☐ Yes ☐ No Hours:			
Thursday	☐ Yes ☐ No Hours:			
Friday				
Saturday	□ Yes □ No Hours:			

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Sunday	☐ Yes ☐ No Hours:					
	Education					
High School:	igh School: Address:					
From:	To: Did you graduate? Yes No Degree:					
College:	Address:					
From:	To: Did you graduate? Yes No Degree:					
Other (specify): Address:						
From:	Did you graduate? Yes No Degree:					
Do you have any professional licenses, certifications or designations?						
	References					
Please list three names of persons not related to you as references.						
Name:	Relationship:					
Company (if a	pplicable): Phone:					
Address:						
Name:	Relationship:					
Company (if a	pplicable):Phone:					
Address:						
Name:	Relationship:					
Company (if a	pplicable):Phone:					
Address:						
Employment History						
Please list for	ner employers, starting with the most current first.					
Company:	Supervisor:					
Address:	Phone:					

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Job Title:		Starting Salary:	Ending Salary:	
Job Duties:				
		Reason for Leaving:		
May we contact	t this employer for	a reference? □ Yes □ No		
Company:		Supervisor:		
Address:		Phone:		
Job Title:		Starting Salary:	Ending Salary:	
Job Duties:				
From:	To:	Reason for Leaving:		
May we contact	t this employer for	a reference? □ Yes □ No		
		Employment History		
Company:		Supervisor:		
Address:		Phone:		
Job Title:		Starting Salary:	Ending Salary:	
Job Duties:				
From:	To:	Reason for Leaving:		
May we contact	t this employer for	a reference? □ Yes □ No		
Company:		Supe	rvisor:	
Address:		Phone:		
Job Title:		Starting Salary:	Ending Salary:	
Job Duties:				
		Reason for Leaving:		

May we contact this employer for a reference?

Military Service

Branch: _______ From: ______ To: ______

Rank at Discharge: ______ Type of Discharge: _______

If other than honorable, explain: _______

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

Application

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