

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last 7 years? YES NO
(Conviction will not necessarily disqualify applicant from employment.)

If Yes, please explain: _____

Veteran of the U.S. Military service? YES NO If Yes, what branch? _____

LANGUAGE(S):

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and office held. (You may exclude those which indicate race, color, religion, sex or national origin): _____

REFERENCES (not related to you and are not previous employers)

NAME	PHONE	ADDRESS	RELATIONSHIP

Special Employment Notice to Disabled Veterans, Vietnam Era Veterans, and Individuals With Physical or Mental Handicaps: Government contractors are subject to 38 USC 2012 of the Vietnam Era Veterans Readjustment Act of 1974 which requires that they take affirmative action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended, which requires government contractors to take affirmative action to employ and advance in employment qualified handicapped individuals.

If you are a disabled veteran, or have a physical or mental handicap, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodation to enable you to perform the job to the best of your ability in a proper and safe manner. This information will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect your consideration for employment. If you wish to be identified, please sign below.

- Handicapped Individual
- Disabled Veteran
- Vietnam Era Veteran

Print Name: _____

Signed: _____

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origin.

Employer	Telephone	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate/Salary		
Supervisor				
Reason for Leaving				
Employer	Telephone	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate/Salary		
Supervisor				
Reason for Leaving				
Employer	Telephone	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate/Salary		
Supervisor				
Reason for Leaving				
Employer	Telephone	Dates Employed		Work Performed
Address		From	To	
Job Title		Hourly Rate/Salary		
Supervisor				
Reason for Leaving				

(If you need additional space, please continue on a separate sheet of paper.)

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experience: _____

Education

	Elementary					High				College/University				Graduate/ Professional			
School Name																	
Years Completed	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Describe Course of Study																	
Describe Specialized Training, Apprenticeship, Skills & Extra Curricular Activities																	

Honors Received: _____

State any additional information you feel may be helpful to us in considering your application.

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the company.

Applicant Signature: _____ Date: _____

For Personnel Department Use Only

Arrange Interview	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Employed	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Date of Employment	_____		Hourly Rate/Salary	_____	
Job Title	_____		Department	_____	
Remarks	_____				
