

List the language, or languages you speak, read and write.
Please use the words FLUENT, GOOD or FAIR to describe proficiency.

LANGUAGE

SPEAK

READ

WRITE

Are you a veteran of U.S. military service? Yes No

If Yes, which branch: _____

List professional, trade, business or civic activities and offices held. You may exclude memberships which would reveal sex, race, religion, national origin, age ancestry, handicap or other protected status:

Give name, address and telephone numbers of three references who are not related to you and are not previous employers:

VETERANS & DISABLED

If you are a disabled veteran, or have a physical or mental disability you are invited to volunteer this information which 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 mark below.

Disabled Veteran

Disabled Individual

Signature: _____

EMPLOYMENT EXPERIENCE

Begin with your present or last job. Include military service assignments and volunteer activities. You may exclude organization names which indicate race, color, religion, gender, national origin, disability or other protected status.

Employer: _____ Supervisor: _____

Telephone: _____ Address: _____

Employment: _____ Wage: _____
START DATE ENDING DATE STARTING WAGE ENDING WAGE

Job Title / Work Performed: _____

Reason for Leaving: _____

Employer: _____ Supervisor: _____

Telephone: _____ Address: _____

Employment: _____ Wage: _____
START DATE ENDING DATE STARTING WAGE ENDING WAGE

Job Title / Work Performed: _____

Reason for Leaving: _____

Employer: _____ Supervisor: _____

Telephone: _____ Address: _____

Employment: _____ Wage: _____
START DATE ENDING DATE STARTING WAGE ENDING WAGE

Job Title / Work Performed: _____

Reason for Leaving: _____

SPECIAL SKILLS & QUALIFICATIONS

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

EDUCATION

	Elementary	High School	University	Professional
School Name:				
Years Completed:				
Diploma/Degree:				
Course of Study:				
Describe honors received, apprenticeship, skills, specialized training or extra curricular activities: <hr/> <hr/>				

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. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire at to whether or not applications are being accepted at this that time. The applicant understands that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that affect is executed by the employer in writing. 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 employer.

Applicant Signature: _____ Date: _____

INTERNAL USE

Arrange Interview: Yes No

Remarks: _____

Employed: Yes No Interviewer: _____

Job Title: _____ Hourly Rate/Salary: _____

Department: _____ Date of Employment: _____

By (name & title): _____ Date: _____