

APPLICATION FOR EMPLOYMENT

Pre-Employment Questionnaire
Equal Opportunity Employer

Date: _____

PERSONAL INFORMATION

Phone#

NAME (LAST NAME FIRST)			
ADDRESS	CITY	STATE	ZIP CODE

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED	
ARE YOU EMPLOYED? _____ YES _____ NO	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? _____ YES _____ NO		
EVER APPLIED TO THIS COMPANY BEFORE? _____ YES _____ NO	WHERE?	WHEN?	

NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE	GRADUATE OR DEGREE	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
BUSINESS/TECH				

MILITARY SERVICE _____ YES _____ NO

Duty/Specialized Training: _____

FORMER EMPLOYERS

(LIST LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE, MONTH AND YEAR	Name And Address Of Employer	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

(CONTINUED ON OTHER SIDE)

Application for Employment

REFERENCES

Give below the names of three persons not related to you, whom you have known at least one year

	Name	Address	Business	Years Known
1				
2				
3				

AUTHORIZATION

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE."

Date _____ Signature _____

Interviewed By _____ Date _____

DO NOT WRITE BELOW THIS LINE

REMARKS

NEATNESS:	CHARACTER:	
PERSONALITY:	ABILITY:	
HIRED:	FOR DEPT.:	POSITION:
SALARY WAGES:	WILL REPORT:	

APPROVED: 1. _____ 2. _____ 3. _____
EMPLOYMENT MANAGER DEPT. HEAD GENERAL MANAGER

THIS APPLICATION FOR EMPLOYMENT IS SOLD ONLY FOR GENERAL USE THROUGHOUT THE UNITED STATES. ADAMS ASSUMES NO RESPONSIBILITY AND HEREBY DISCLAIMS ANY LIABILITY FOR THE INCLUSION IN THIS FORM OF ANY QUESTIONS OR REQUESTS FOR INFORMATION UPON WHICH A VIOLATION OF LOCAL, STATE AND/OR FEDERAL LAW MAY BE BASED. IT IS THE USER'S RESPONSIBILITY TO ENSURE THAT THIS FORM'S USE COMPLIES WITH APPLICABLE LAWS, WHICH CHANGE FROM TIME TO TIME.