



Employment Application

APPLICANT INFORMATION

Last Name		First		M.I.	Date	
Street Address				Apartment/Unit #		
City			State		ZIP	
Phone			E-mail Address			
Date Available		Social Security No.		Desired Salary		
Position Applied for						
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?			
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain			

WHO ARE YOU?

How many beers in a six pack?	
Do you believe Elvis is alive?	
Have you seen him? If so where?	
If you were a car what would you be?	
Musical preferences ? Country, opera ,classical, rock, folk, bluegrass , metal, hardcore, yanni, new age, rap, acid jazz, jazz , fusion or other	
Favorite color?	
Do you have transportation? Car, bike , thumb, shoes , flying saucer or other	
If you weren't human what would you be? (rock, saxophone, animal, etc.)	
What would you rather be doing and why?	
Shoe size?	
Do you speak any other language? What?	
Why do you want to work here?	
It is said you are what you eat, what are you?	
What were your last three meals?	
Describe the most memorable food or food related experience?	
Is there any information about yourself that is reasonable to know about yourself that would affect your ability to perform as we need?	

EDUCATION

High School				Address			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College				Address			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other				Address			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES

Please list three, non-family, professional references.

Full Name			Relationship		
Company			Phone		
Address					
Full Name			Relationship		
Company			Phone		
Address					
Full Name			Relationship		
Company			Phone		
Address					

PREVIOUS EMPLOYMENT

Company			Phone		
Address			Supervisor		
Job Title			Starting Salary	\$	Ending Salary
Responsibilities					
From	To	Reason for Leaving			
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Company			Phone		
Address			Supervisor		
Job Title			Starting Salary	\$	Ending Salary
Responsibilities					
From	To	Reason for Leaving			
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>					

