



Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone () _____ E-mail Address: _____

Date Available: _____ Social Security _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States?

YES	NO
-----	----

 If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company?

YES	NO
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 If so, when? _____

Have you ever Been convicted of a felony?

YES	NO
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 If yes to any of these, please explain: (use reverse side if needed)

Had a DUI? _____

Been arrested? _____

Had an adjudication withheld? _____

Education

High School: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____

College: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references (no relatives)

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 NO

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 NO

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 NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

_____ I understand that completion of this application does not guarantee a job interview or job offer.

_____ I hereby authorize the Company to verify all of the information I have provided on my application. I also agree to execute as a condition of employment or continued employment any additional written authorizations necessary for the Company to obtain access to, and copies of, records pertaining to this information. I expressly authorize the Company to contact prior employers and release those prior employers and the Company from liability arising from providing information about my employment history.

_____ State and federal law require the Company to make reasonable accommodation of handicapped applicants and employees where the accommodation does not impose hardship on the Company. Florida law provides that the employees and applicants may request an accommodation of their handicap by notifying the Company in writing of the need for accommodation with 182 days of the date that the individual knows or should have known that an accommodation is needed.

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: _____