

PERSONAL INFORMATION

NAME (Last/First/Middle)		Are you over 18? <input type="checkbox"/> Yes <input type="checkbox"/> No	TELEPHONE
ADDRESS (Street/City/State/Zip)			
SOCIAL SECURITY NUMBER		Can you furnish birth certificate or other proof of U.S. citizenship or permanent Visa? <input type="checkbox"/> Yes <input type="checkbox"/> No	

WORK PREFERENCE

TYPE OF WORK PREFERRED OR SPECIFIC POSITION SOUGHT	DATE AVAILABLE
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EDUCATION

Having been told the educational requirements for this position, please provide information to indicate that you qualify

TYPE OF SCHOOL	SCHOOL NAME / ADDRESS	MAJOR SUBJECTS STUDIED	LAST YEAR COMPLETED	DATE OF GRADUATION	DEGREE EARNED
Business School / Vo-Tech					
College / University					

EMPLOYMENT/INTERNSHIP HISTORY

*Give employment record as completely as possible, starting with present or last employer.
For any unemployed or self-employed periods, show dates and locations.*

COMPANY NAME / ADDRESS	BEGINNING AND ENDING DATES (MONTH / YEAR)	RATES OF PAY	TITLE OF JOB	SUPERVISOR	REASON FOR LEAVING

CHARACTER INFORMATION

Have you ever been convicted of a felony? (A conviction does not constitute an automatic bar to employment. The seriousness of the crime and the date of the conviction will be considered.)

Yes No

If yes, please explain.

LIST TWO PERSONS (PROFESSIONAL WORK RELATED) OTHER THAN RELATIVES WHOM WE MAY CONTACT AS REFERENCES:

NAME	ADDRESS	BUSINESS / POSITION	TELEPHONE
1.			
2.			

SKILLS INFORMATION

To be completed by applicants for secretarial or clerical positions.

HAVING READ THE JOB QUALIFICATIONS, PLEASE DEMONSTRATE THAT YOU QUALIFY.

Typing w.p.m. _____ Shorthand w.p.m. _____

Please provide your level of proficiency in the following:

	BEGINNING	INTERMEDIATE	ADVANCED
Microsoft Word	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Excel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft PowerPoint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Microsoft Outlook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE LIST ANY ADDITIONAL COMPUTER SOFTWARE PACKAGES WHICH YOU HAVE EXPERIENCE:

PLEASE READ BEFORE SIGNING

If you have any questions, please ask the employment interviewer before signing.

Be advised that a routine inquiry may be made during our initial or subsequent processing. No regard is given to race, color, creed, sex, age or national origin.

DATE

APPLICANT SIGNATURE