

Application for Employment Information Technology

Part 1. GENERAL INFORMATION

Please complete all information: If you have a resume, attach it to this form:

POSITION (Job title of Interest)

NAME (Last, First, and Middle Initial)

SOCIAL SECURITY NO. -Optional)

MAILING ADDRESS (Include apartment number, if any)

E-MAIL ADDRESS

HOME TELEPHONE

CITY

COUNTY

STATE

ZIP

WORK (or message) TELEPHONE

Part 2. BACKGROUND INFORMATION

- If a driver's license, visa or other special license is required for this position, please complete the following:

Driver's License Number:

Other (Indicate type)

- Other than English, what languages do you speak, read, or write fluently?

- Have you been convicted of a misdemeanor or felony within the past ten (10) years that might unfavorably affect your fitness for this job? **Yes No**

Answering yes will not automatically bar you from this job.

- How did you learn of this employment opportunity?

COMPANY PERSONNEL JOB LINE

☐

JOB FAIR – LOCATION:

OTHER

NEWSPAPER

☐

INTERNET WEBSITE ☐

Part 3. EDUCATION AND TRAINING

Review of education:

- Have you graduated from high school or passed the GED?

☐

YES

☐

NO

- If in college, what is your graduation date? _____

List college, business school, military training, and other relevant education below:

School Name and Location	Month and Year Attended	Credits Earned			Major	Type of Degree	Year degree received
		Quarter	Semester	Other (Specify)			
1	From /						
	To /						
2	From /						
	To /						
3	From /						
	To /						

Part 4. EMPLOYMENT HISTORY

This section must be completed.

You may use this form for both volunteer and paid experience. For volunteer work, 174.3 hours equals one month of experience.

1. Present or Last Employer		Employer's Address		Employer's Phone Number	
Your Title	Months & Years Employed in this Position From / To /	Total Months	Average Hours /Per Week	Last Salary	
Immediate Supervisor's Name	Reason for Leaving	Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised		
Specific Duties:					

2. Present or Last Employer		Employer's Address		Employer's Phone Number	
Your Title	Months & Years Employed in this Position From / To /	Total Months	Average Hours /Per Week	Last Salary	
Immediate Supervisor's Name	Reason for Leaving	Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised		

Specific Duties:					
3. Present or Last Employer		Employer's Address		Employer's Phone Number	
Your Title		Months & Years Employed in this Position From / To /		Total Months	Average Hours /Per Week
Immediate Supervisor's Name		Reason for Leaving		Volunteer (4) <input type="checkbox"/>	Number of Employees Supervised
Specific Duties:					
Part 5. REFERENCES					
List the name, address and phone number for two personal references (not immediate relatives):					
Name:		Mailing Address:		Phone:	
1. _____		_____		_____	
2. _____		_____		_____	
Part 6. DATE AND SIGNATURE					
TO BE ACCEPTED, YOU MUST SIGN AND DATE THIS APPLICATION.		All answers and statements are true and complete to the best of my knowledge. I understand that the company may verify information, and that untruthful or misleading answers are cause for rejection of this application, removal of my name from a register, or dismissal if employed.			
Sign and date:		/	/		