



**EDUCATION**

	Elementary School				High School				Undergraduate College/University Vocational-Technical				Graduate/Professional			
School Name & Location																
Years Completed	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																
Describe Course of Study																
Describe any specialized training, apprenticeship, skills & extra-curricular activities																
Describe any honors you have received																
State any additional information you feel may be helpful to us in considering your application																

List professional, trade, business or civic activities and offices held.  
*You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES**

Give name, address & telephone number of three references that are not related to you and are not previous employers.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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Have you ever had any job-related training in the United States Military?       Yes       No  
 If yes, please describe

\_\_\_\_\_

\_\_\_\_\_

Are you physically or otherwise unable to perform the duties of the job for which you are applying?       Yes       No

**EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Length of Service	Work Performed
Address	Start Date _____ End Date _____	
Telephone Number(s)	Starting Pay: Ending Pay:	
Job Title	Supervisor	
Reason for Leaving		

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If you need additional space, please continue on a separate sheet of paper.

**SPECIAL SKILLS & QUALIFICATIONS**

Summarize special job-related skills and qualifications acquired from employment or other experience.

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## APPLICANT'S STATEMENT

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I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at this time.

The applicant understands that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that affect is executed by the employer and employee in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

### FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview?       Yes       No

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Interviewer

\_\_\_\_\_  
Date

Offered Employment?       Yes       No

Employment Date: \_\_\_\_\_      Job Title: \_\_\_\_\_

Department: \_\_\_\_\_      Pay Rate: \_\_\_\_\_

Approved By: \_\_\_\_\_  
Name & Title      Date

NOTES: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

