

1. Applicant Information

• Your Legal Name:	
• Do you have a nickname?	
• Your Address:	
• City/State/Zip Code:	
• Home Telephone:	() -
• Cell Telephone:	() -
• Email Address:	
• Are you 18 years or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Are you a citizen of the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Are you legally eligible for employment in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• Have you served in the Armed Forces of the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes give dates	to
Branch	
Highest Rank	
Duties/Skills	
• Are you now a member of the National Guard or the Reserves?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Rank	
Duties/Skills	
• Have you ever been convicted of a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
• If yes, please explain	“Note: You don’t want the details of a conviction stored in an employer’s file or computer. In the space where it asks about your convictions, write, “Please see me.” During the interview, you can explain what happened”

2. Employment Desired

<ul style="list-style-type: none"> • Which position are you seeking: 	
<ul style="list-style-type: none"> • Hourly wage desired: 	<p>“Note: Don’t give a salary. You may price yourself out of the job if it’s too large, or look desperate if it’s too low. Instead just write “Standard Wage.” Or put the salary listed on the Job Ad</p>
<ul style="list-style-type: none"> • Are you seeking: 	<input type="checkbox"/> Full-Time work <input type="checkbox"/> Part-Time Work <input type="checkbox"/> Seasonal Work
<ul style="list-style-type: none"> • Days/Hours available: 	<input type="checkbox"/> Monday Hours available: <input type="checkbox"/> Tuesday Hours available: <input type="checkbox"/> Wednesday Hours available: <input type="checkbox"/> Thursday Hours available: <input type="checkbox"/> Friday Hours available: <input type="checkbox"/> Saturday Hours available: <input type="checkbox"/> Sunday Hours available:
<ul style="list-style-type: none"> • When can you begin work? 	
<ul style="list-style-type: none"> • Can you work evenings? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • Are you available for overtime? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • If hired, will you have reliable transportation to and from work? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
<ul style="list-style-type: none"> • Have you been employed with us in the past? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
If “Yes” what was your job title?	
Supervisor’s name	
Department	
Store’s address	
Dates of employment	
Reason for leaving	
<ul style="list-style-type: none"> • Do you have a friend or relative employed by us? 	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<p>If you do, call your friend/relative and ask if you can put their name on your job application. Also ask if they would put in a good word for you.</p>
If “Yes” what is the person’s name	
Job Title	
Department	
Store’s address	
Phone	
<ul style="list-style-type: none"> • How were you referred to us? 	<input type="checkbox"/> Friend or relative <input type="checkbox"/> “Now hiring” sign <input type="checkbox"/> Newspaper ad <input type="checkbox"/> Our web site <input type="checkbox"/> Other web site <input type="checkbox"/> Radio or TV ad <input type="checkbox"/> Job fair <input type="checkbox"/> School placement office <input type="checkbox"/> State Employment Office <input type="checkbox"/> Other

3. Education

• High school or vocational school attended	
School's name	
Address	
City/State/Zip	
Years completed	
Do you have a diploma/GED	<input type="checkbox"/> H.S. Diploma <input type="checkbox"/> GED
Program or specialty	
Grade Point Average (GPA)	
Sports/Clubs/Groups	
• College or university's attended	
School's name	
Address	
City/State/Zip	
Years completed	
Degree/Certificate	
Major or Specialty	
Grade Point Average (GPA)	
Sports/Clubs/Groups	
• Other school or program attended	
In this section you could include any internships, workshops, seminars, or special classes	
School's name	
Address	
City/State/Zip	
Years completed	
Degree/Certificate	
Major or Specialty	
Grade Point Average (GPA)	
Sports/Clubs/Groups	
• Other school or program attended	
School's name	
Address	
City/State/Zip	
Years completed	
Degree/Certificate	
Major or Specialty	
Grade Point Average (GPA)	
Sports/Clubs/Groups	

4. Employment

• Current or last employer

If you have no formal work experience list the informal jobs – volunteer, charitable, civic work, self-employment, freelance work, or homemaker. List casual jobs like coaching, babysitting, or mowing lawns, etc.

Company name			
Address			
City/State/Zip			
Supervisor's name			
Supervisor's telephone number			
May we contact him or her?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Your reason for leaving			
Date you started			
Date you left			
Your wage (hourly, monthly, annually)	Hourly	Month/Bi-Weekly	Annual
Hours worked per week			
Your job title			
Your duties			
Your job skills			
Your accomplishments			
• Previous employer			
Company name			
Address			
City/State/Zip			
Supervisor's name			
Supervisor's telephone number			
May we contact him or her?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Your reason for leaving			
Date you started			
Date you left			
Your wage (hourly, monthly, annually)	Hourly	Month/Bi-Weekly	Annual
Hours worked per week			
Your job title			
Your duties			
Your job skills			
Your accomplishments			
• Previous employer			
Company name			
Address			
City/State/Zip			
Supervisor's name			
Supervisor's telephone number			
May we contact him or her?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Your reason for leaving			
Date you started			
Date you left			
Your wage (hourly, monthly, annually)	Hourly	Month/Bi-Weekly	Annual
Hours worked per week			

Your job title	
Your duties	
Your job skills	
Your accomplishments	
• Previous employer	
Company name	
Address	
City/State/Zip	
Supervisor's name	
Supervisor's telephone number	
May we contact him or her?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Your reason for leaving	
Date you started	
Date you left	
Your wage (hourly, monthly, annually)	Hourly Month/Bi-Weekly Annual
Hours worked per week	
Your job title	
Your duties	
Your job skills	
Your accomplishments	
• Previous employer	
Company name	
Address	
City/State/Zip	
Supervisor's name	
Supervisor's telephone number	
May we contact him or her?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Your reason for leaving	
Date you started	
Date you left	
Your wage (hourly, monthly, annually)	Hourly Month/Bi-Weekly Annual
Hours worked per week	
Your job title	
Your duties	
Your job skills	
Your accomplishments	
• Please explain any gaps in your employment	
If you months of unemployment between jobs you should offer an explanation.	

5. List Three References

A reference is someone who can testify to your character and abilities. Employers, coaches, teachers, volunteer leaders, coworkers, clergy, etc. **But, before you offer anyone's name as a reference, make sure that you have that person's permission!**

- **Person's name**

Address	
Telephone	() -
How do you know this person?	
Years known	

- **Person's name**

Address	
Telephone	() -
How do you know this person?	
Years known	

- **Person's name**

Address	
Telephone	() -
How do you know this person?	
Years known	

6. Additional Information

- **Please list any special skills, languages, qualifications, certifications, or licenses not mentioned**

- **Please give any additional information you feel may be helpful when considering your application**