## **APPLICATION FOR EMPLOYMENT**

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

PERSONAL INFORM	MATION E					
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					SOCIAL SECURITY	
NAME	LAST	FIRST		MIDDLE	NUMBER	
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PRESENT ADDRESS	STREET	CITY		STATE	ZIP	
PERMANENT ADDRESS	3					
	STREET	CITY		STATE	ZIP	
PHONE NO.	ARE YO	DU 18 YEARS OR	OLDER?	Yes 🔲	No 🗖	
ARE YOU PREVENTED IN THIS COUNTRY BECA				Yes.□	No	
EMPLOYMENT DES	IRED		DATE YOU		CALADY	
POSITION			CAN START		SALARY DESIRED	
ADE VOLUENCE	IF SO MAY WE INQUIRE					
ARE YOU EMPLOYED N	OW? Yes ☐ No ☐	OF '	YOUR PRESE	NT EMPLOYE	R? Yes ☐ No ☐	
EVER APPLIED TO THIS	COMPANY BEFORE	E? Yes□No□	WHERE?		WHEN?	
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REFERRED BY						
EDUCATION	NAME AND LOCAT	ION OF SCHOOL	*NO OF YEARS ATTENDED	*DID YOU GRADUATE?	SUBJECTS STUDIED	
GRAMMAR SCHOOL						
HIGH SCHOOL						
COLLEGE						
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL						
GENERAL						
SUBJECTS OF SPECIAL	_ STUDY OR RESEA	RCH WORK				
SPECIAL SKILLS						
	TIC ETC.					
ACTIVITIES: (CIVIC ATHLE EXCLUDE ORGANIZATIONS, THE NA		E RACE, CREED. SEX. AG	E, MARITAL STATUS	S, COLOR OR NATION	N OF ORIGIN OF ITS MEMBERS.	
U. S MILITARY OR	DANIZ			T MEMBERSHIP		
NAVAL SERVICE	RANK		INATIONA	L GUAND OR R	ESERVES Yes 🗖 No 🔲	

<sup>\*</sup>This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26. 1991

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WHAT DID YOU LIKE MOS	T ABOUT THIS JOI	3?			
REFERENCES: GIV	E THE NAMES OF T	THREE PERSONS NOT RELATED	TO YOU, WHOM	YOU HAVE KNO	WN AT LEAST ONE YEAR.
NAME		ADDRESS	ВІ	USINESS	YEARS ACQUAINTED
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This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination