

# Application For Employment

This company is an Equal Opportunity/Affirmative Action employer

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Position Desired: \_\_\_\_\_

Salary Requirement: \$ \_\_\_\_\_ Date Available for Work: \_\_\_\_/\_\_\_\_/\_\_\_\_

Emergency contact (Name and phone number): \_\_\_\_\_

\_\_\_\_\_

## Education

School

Grade Completed

Diploma/Degree

High School

College, University, Tech School

College, University, Tech School

Other

## Professional Licenses & Affiliations

List the name, number, year, and expiration date of any professional licenses you hold:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Skills

List the computer programs and equipment you can operate

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List other skills which may be important in considering your qualifications

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## Employment Record

List most recent employment first. Use separate paper if additional space is required.

Present Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Employed from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Beginning Salary: \$ \_\_\_\_\_

Job Titles: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_

Duties: \_\_\_\_\_

Supervisor Name and Title: \_\_\_\_\_

Present Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Employed from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Beginning Salary: \$ \_\_\_\_\_

Job Titles: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_

Duties: \_\_\_\_\_

Supervisor Name and Title: \_\_\_\_\_

Present Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Employed from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Beginning Salary: \$ \_\_\_\_\_

Job Titles: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_

Duties: \_\_\_\_\_

Supervisor Name and Title: \_\_\_\_\_

Do you have any volunteer, non-paid experience? If so, please describe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List memberships in professional organizations and/or associations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List TV Shows, Movies, and Live Broadcasts with which you have been involved:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **Applicant Waiver Agreement**

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information is grounds for refusal to hire or, if hired, dismissal.

I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application and release all such parties from all liability for any damage that may result from furnishing such information to you. I authorize you to request and receive such information.

In consideration for my employment and my being considered for employment by your company, I agree to conform to the rules and regulations of the company and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by your company at any time, at the company's sole option and without any prior notice to me. I further acknowledge that my employment may be terminated, and any offer of employment, if such is made, may be withdrawn, with or without prior notice, at any time, at the option of the company or myself.

I understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or assure or make some other personnel move, either prior to commencement of employment or after I have become employed, or to assure any benefits or terms and conditions of employment, or make any agreement contrary to the foregoing.

I acknowledge that I have been advised that this application will remain active for no more than 90 days from the date it was made.

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Signature of Applicant

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Date

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Signature of Company Representative

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Date