

Do you object to wearing a Uniform? Yes No

Do you object to working nights? Yes No

Do you object to working shifts? Yes No

Do you object to a voice stress analysis test? Yes No

Work History

Are you now or have you ever been engaged in any business as an owner, partner, or corporate board member? Yes No If Yes give details below:

Have you ever been fired or forced to resign because of misconduct or unsatisfactory job performance? Yes No If Yes explain below:

Have your employers always treated you fairly? Yes No

If not, please explain:

Have you ever been reprimanded for being late for work? Yes No

Have you ever been dishonorably discharged from any branch of the Armed Services?
 Yes No If Yes please explain:

References

Give the names of six people, other than relatives or past employers, who can provide information about your character, experience, personality and other qualities.

<u>Name</u>	<u>Address</u>	<u>Telephone</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you or an immediate family member ever been arrested for or convicted of a felony?

Yes No

If Yes complete the following:

<u>Name</u>	<u>Date</u>	<u>Location</u>	<u>Charge</u>	<u>Disposition</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List all schools attended:

<u>Name of School</u>	<u>Location</u>	<u>From</u>	<u>To</u>	<u>Years Completed</u>
Grade School	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
High School	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
College or University	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List all jobs you have held in the last ten years. Put your present or most recent job first. If you need more space you may attach additional pages. Include Military Service in proper time sequence and list all part time/ temporary employment.

- 1. Name of Company _____
Address of Company _____
Phone Number of Company _____
Title of Present or Last Position _____
Date Employed _____ Date Separated _____
Starting Salary _____ Ending Salary _____
Full-time _____ Part-Time _____
If Part-time, Number of Hours Per Week _____
Name and Title of Supervisor _____

Duties: _____

Reason For Leaving: _____
May We contact This Employer For a Work Reference? _____ Yes _____ No
Remarks: _____

- 2. Name of Company _____
Address of Company _____
Phone Number of Company _____
Title of Present or Last Position _____
Date Employed _____ Date Separated _____
Starting Salary _____ Ending Salary _____
Full-time _____ Part-Time _____
If Part-time, Number of Hours Per Week _____
Name and Title of Supervisor _____

Duties: _____

Reason For Leaving: _____
May We contact This Employer For a Work Reference? _____ Yes _____ No
Remarks: _____

3. Name of Company _____
Address of Company _____
Phone Number of Company _____
Title of Present or Last Position _____
Date Employed _____ Date Separated _____
Starting Salary _____ Ending Salary _____
Full-time _____ Part-Time _____
If Part-time, Number of Hours Per Week _____
Name and Title of Supervisor _____

Duties: _____

Reason For Leaving: _____
May We contact This Employer For a Work Reference? _____ Yes _____ No
Remarks: _____

4. Name of Company _____
Address of Company _____
Phone Number of Company _____
Title of Present or Last Position _____
Date Employed _____ Date Separated _____
Starting Salary _____ Ending Salary _____
Full-time _____ Part-Time _____
If Part-time, Number of Hours Per Week _____
Name and Title of Supervisor _____

Duties: _____

Reason For Leaving: _____
May We contact This Employer For a Work Reference? _____ Yes _____ No
Remarks: _____

5. Name of Company _____
 Address of Company _____
 Phone Number of Company _____
 Title of Present or Last Position _____
 Date Employed _____ Date Separated _____
 Starting Salary _____ Ending Salary _____
 Full-time _____ Part-Time _____
 If Part-time, Number of Hours Per Week _____
 Name and Title of Supervisor _____

Duties: _____

Reason For Leaving: _____
 May We contact This Employer For a Work Reference? _____ Yes _____ No
 Remarks: _____

6. Name of Company _____
 Address of Company _____
 Phone Number of Company _____
 Title of Present or Last Position _____
 Date Employed _____ Date Separated _____
 Starting Salary _____ Ending Salary _____
 Full-time _____ Part-Time _____
 If Part-time, Number of Hours Per Week _____
 Name and Title of Supervisor _____

Duties: _____

Reason For Leaving: _____
 May We contact This Employer For a Work Reference? _____ Yes _____ No
 Remarks: _____

