

# EMPLOYMENT APPLICATION

Pre-Employment Questionnaire / EOE



## APPLICANT INFORMATION

|  |  |              |  |                |  |                  |  |
|--|--|--------------|--|----------------|--|------------------|--|
| Last Name  |  | First        |  | M.I.           |  | Date             |  |
| Street Address   |  |              |  |                |  | Apartment/Unit # |  |
| City   |  | State        |  | Zip Code       |  |                  |  |
| Home Phone #   |  | Cell Phone # |  | E-mail Address |  |                  |  |
| If hired, are you authorized to work in the U.S.?    YES <input type="checkbox"/> NO <input type="checkbox"/>                                  |  |              |  |                |  |                  |  |
| Have you ever been convicted of an adult felony?    YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when? <input type="text"/> |  |              |  |                |  |                  |  |
| If yes, explain: <input type="text"/>  |  |              |  |                |  |                  |  |

## EDUCATION

|   |                              |                             |        |   |  |  |  |
|---|------------------------------|-----------------------------|--------|---|--|--|--|
| Do you have a High School Diploma or GED?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                              |                             |        | How many years did you attend? <input type="text"/> |  |  |  |
| College   |                              | City/State                  |        | How many years did you attend? <input type="text"/> |  |  |  |
| Did you graduate?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |   |  |  |  |
| Other   |                              | City/State                  |        | How many years did you attend? <input type="text"/> |  |  |  |
| Did you graduate?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |   |  |  |  |
| Please list any technical training or special skills you have: <input type="text"/>                   |                              |                             |        |   |  |  |  |
| <input type="text"/>  |                              |                             |        |   |  |  |  |
| <input type="text"/>  |                              |                             |        |   |  |  |  |

## PROFESSIONAL REFERENCES

|                     |  |              |  |
|---------------------|--|--------------|--|
| Full Name           |  | Relationship |  |
| Contact Information |  |              |  |
| Full Name           |  | Relationship |  |
| Contact Information |  |              |  |
| Full Name           |  | Relationship |  |
| Contact Information |  |              |  |

## GENERAL

|  |  |  |  |   |                                |                               |                                 |
|--|--|--|--|---|--------------------------------|-------------------------------|---------------------------------|
| Please check ALL in which you have experience: | Typing <input type="checkbox"/>                  | Filing <input type="checkbox"/>          | Cash Handling <input type="checkbox"/> | Customer Service <input type="checkbox"/> | Sales <input type="checkbox"/> | EBay <input type="checkbox"/> | 10-Key <input type="checkbox"/> |
|  | Multi-Tasking <input type="checkbox"/>           | Pawn Broking <input type="checkbox"/>    | Cell Phones <input type="checkbox"/>   | Electronics <input type="checkbox"/>      | Tools <input type="checkbox"/> |                               |                                 |
|  | Multi-Line Phone System <input type="checkbox"/> | Tax Preparation <input type="checkbox"/> | Jewelry Sales <input type="checkbox"/> |   |                                |                               |                                 |
| Languages spoken:                              | <input type="text"/>                             |  |  |   |                                |                               |                                 |

