Part II: Completing a Job Application

Directions: Complete the following job application form. Key your responses in the spaces provided or print the information in your very best handwriting.

Personal Information

Last Name

Last Name		First Name			Middle Initial			
Address	City	/		State	Zip			
How long at present address?	Phone Number	Phone Number			Last four digits of Social Security Number			
What date will you be available for work?								
Type of employment desired Full-Time Only	Part-Time Only Full or Part-Time							
If hired, can you furnish proof that you are legally eligible to work in the United States?								
If hired, can you furnish proof of age?								
What position are you applying for	What are yo	What are your salary requirements?						
Hours you will be available to work								
Have you ever been convicted of a felony?								
If yes, please explain								
The XYZ Company is a drug-free employer and you will be required to pass a drug screening test as a condition of employment. I understand and agree to participate in this testing. () initials								
Computer Software Knowledge								
List the software that you have experience using and your level of proficiency for each.								

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Name and Address of Schoo	l C	Course of Study				List Diploma or Degree		
High School								
Other Education/ Training								
Employment History	,							
List your two most recent employers, beginning with your present employer.								
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Company			Start Da	ate	Supervisor		Salary	
Address E		End	Date	Position and		sponsibilities		
Address			Duto	1 Osition and ries		50010101111100		
City/State/Zip								
Telephone	Reaso	eason for Leaving						
T -			1					
Company			Start Date S		Supervisor		Salary	
Address	End I		Date Pos		 sition and Responsibilities			
City/State/Zip								
Telephone	Reaso	n for l	eaving					
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Signature:_____ Date:_____