## APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

Last Name	First	Middle	Date
Street Address			Home Telephone
			( )
City, State, Zip			Business Telephone
ч			( )
Have you ever applied for employm	ent with us?		Social Security #
☐ Yes ☐ No If yes: Mont	h and YearLocation	***************************************	
Position Desired			Pay Expected
Apart from absence for religious ob	servance, are you available for full-time wo	rk?	Will you work overtime if asked?
☐ Yes ☐ No If not, what h	nours can you work?		☐ Yes ☐ No
Are you legally eligible for employm	ent in the United States?		When will you be available
			to begin work?
Other special training or skills (lang	rages, machine operation, etc.)		

	School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or
E	Graduate	•	,		□ Yes	
D U C	College				□ Yes	
T I O	Business /Trade/ Technical				□ Yes	
N	High School				□ Yes	
	Elementary		7		□ Yes	

made applicable of	Membership in Professional or Civic Organizations (Exclude those which may disclose your race, color, religion or national origin)	
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## EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

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	Company Name	Telephone ( )
8	Address	Employed - (State month and year)
	Addiess	From To
	Name of Supervisor	Weekly pay
1	Maine di Supervisor	Start Last
ŀ	State Job Title and Describe Your Work	Reason for leaving
	State Job Title and Describe Your Work	Heason for leaving
	1.10-2011	
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Mys.	Company Name	Telephone
	company Name	( )
-	Address	Employed - (State month and year)
	Address	
-		From To
2	Name of Supervisor	Weekly pay
		Start Last
	State Job Title and Describe Your Work	Reason for leaving
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$\cap$	Company Name	Telephone
		( )
	Address	Employed - (State month and year)
	·	From To
	Name of Supervisor	Weekly pay
3		Start Last
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		-
<b>*</b>	Company Name	Telephone
		( )
:	Address	Employed - (State month and year)
		From To
, l	Name of Supervisor	Weekly pay
4		Start Last
1	State Job Title and Describe Your Work	Reason for leaving
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	DO NOT CO	NTACT
: <u>}</u>	Ne may contact the employers listed ::bove unless you indicate those you	
	above unless you Indicate those you Employer Number(s)Reason  Io not want us to contact.	
	Did you serve in the	If "Yes," in what Branch?
	MILITARY U.S. Armed Forces?	)
ı	Describe any training received relevant to the position for which you are applying.	
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## DO NOT ANSWER ANY QUESTION IN THIS SECTION UNLESS THE BOX IS CHECKED

If the employer has checked the box next to the question, the information requested is needed for a legally permissible reason, including, without limitation, national security considerations, a legitimate occupational qualification or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits discrimination based on age, citizenship and disability. The laws of most States also prohibit some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status and sexual preference.

		Elementary	<del></del>	Niverbook of decorate facilities and the second	
	Provide dates you attended school:	From To		Number of dependents, including yourself	
	High School	College		Are you a Vietnam veteran?	
	From To	From To		Yes \( \square\) No	
	Other (give name and dates)			Sex	
	53.2 (g. 5			☐ Male ☐ Female	
-	Marital Status		<u> </u>	Date of Marriage	
	☐ Single ☐	Engaged			
	☐ Separated ☐	Divorced  Widowed		Are you a U.S. Citizen?	
				☐ Yes ☐ No	
	What was your previous address?  How long at		How long at present address?		
			L1	Years	
				How long at previous address?	
	Have you ever been bonded?   Yes		Years		
	Have you ever been bonded?	□ No		Are you over 18 years of age? ☐ Yes ☐ No	
		ast ten years, excluding misdemeanors and summ		If not, employment is subject to verification of age.	
		ast ten years, excluding misdemeanors and somm If "Yes," describe in full.	nary onen	ses, which has not been annulled, expunged or	
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	State names of relatives and friends working for us, other than your spouse.				
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The information provided in this Application for Employment is true, correct and complete. If you employ me, any misstatement or omission of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment creates no obligation upon you, the employer, to continue to employ me in the future.

Date

Signature

## EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

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ો	Company Name		Telephone
			( )
	Address		Employed - (State month and year)
		Dr	From To
1	Name of Supervisor		Weekly pay
BAG			Start Last
	State Job Title and Describe Your Work		Reason for leaving
	*		
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	Company Name		Telephone
			( )
1	Address		Employed - (State month and year)
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2	Name of Supervisor		Weekly pay
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	State Job Title and Describe Your Work		Reason for leaving
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$\overline{}$	Company Name		Telephone
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	Address		Employed - (State month and year)
			From To
			Weekly pay
3	Name of Supervisor		
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	State Job Title and Describe Your Work		Heason for leaving
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1	Company Name		Telephone
			( )
	Address		Employed - (State month and year)
			From To
-	Name of Supervisor		Weekly pay
4	Marile of Supervisor		
			Start Last
	State Job Title and Describe Your Work		Reason for leaving
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	MILITARY	U.S. Armed Forces? ☐ Yes	□No
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	Describe any training received relevant to the	position for which you are applying.	
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