



APPLICATION FOR EMPLOYMENT
Pre-employment Questionnaire

Date: \_\_\_\_\_

Personal Information

Name: \_\_\_\_\_

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

Phone # \_\_\_\_\_ Secondary # \_\_\_\_\_

Employment Desired

Position: \_\_\_\_\_ Date you can Start: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Are you employed now? Yes [ ] No [ ] May we inquire of your present employer? Yes [ ] No [ ]
Ever applied to this company before? Yes [ ] No [ ] Are you legally eligible to work in this country? Yes [ ] No [ ]

Have you ever been convicted of a criminal offense involving the use or threat of violence, sexual misconduct, driving under the influence, or taking the property of another? Yes [ ] No [ ]

If yes, give the date, place offense and outcome: \_\_\_\_\_

(Answering 'yes' does not constitute an automatic bar to employment. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for will be considered. Please exclude convictions which were sealed, expunged or statutorily eradicated, and any misdemeanor for which probation was successfully completed or otherwise discharged and the case has been judicially dismissed.)

Education History

Table with 4 columns: Name & Location, Number of years Attended, Graduate?, Subjects studied. Rows for High School, College, Trade School.

General Information

Special Job-Related Skills/Training

Three horizontal lines for writing special job-related skills/training.

**Former Employers**

Name of employer	Dates of Employment	Salary	Position	Reason for Leaving
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

**References** (Give below the names of three people we may contact as references)

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Can you perform the essential job-related functions of the position you are applying for? Yes  No   
 Note: you may be asked to describe how you will perform job-related functions. DO NOT DISCLOSE INFORMATION PROTECTED UNDER STATE OR FEDERAL LAW.

**Authorization and Certification**

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This application and waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws"

NOTE: I understand that all employment is at-will, which means that I have the right to terminate employment at any time, with or without cause, and the Employer has the same right. This application does not constitute an offer of employment.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

-----Do Not Write Below this Line-----

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature