

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

DATE: _____

NAME: _____

PRESENT ADDRESS: _____
LAST FIRST MIDDLE

PERMANENT ADDRESS: _____
STREET CITY STATE ZIP CODE

PHONE NUMBER: _____ **ARE YOU 18 YEARS OR OLDER?** YES NO

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES NO

EMPLOYMENT DESIRED

POSITION: _____ **DATE YOU CAN START:** _____ **DESIRED SALARY:** _____

ARE YOU EMPLOYED NOW? _____ **IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?** _____

EVER APPLIED TO THIS COMPANY BEFORE? _____ **WHERE?** _____ **WHEN?** _____

REFERRED BY: _____

EDUCATION	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH: _____

SPECIAL SKILLS: _____

ACTIVITIES: (CIVIC, ATHLETIC, ETC.) _____

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS.

U.S. MILITARY OR NAVAL SERVICE: _____ **RANK:** _____ **PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES:** _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

IF SO, PLEASE EXPLAIN: _____

FORMER EMPLOYERS: (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST.)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM TO				
FROM TO				
FROM TO				
FROM TO				

WHICH OF THESE JOBS DID YOU LIKE BEST AND WHY?

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUANTED
1.			
2.			
3.			

IN CASE OF EMERGENCY NOTIFY

NAME ADDRESS PHONE NO.

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYEMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS AND AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING."

DATE: SIGNATURE:

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: DATE:

REMARKS:

NEATNESS: ABILITY:

HIRED: YES NO POSITION: DEPT:

SALARY/WAGE: DATE REPORTING TO WORK:

APPROVED: 1. EMPLOYMENT MANAGER 2. DEPARTMENT HEAD 3. GENERAL MANAGER

AFFIRMATIVE ACTION VOLUNTARY INFORMATION

COMPLETION OF INFORMATION BELOW IS VOLUNTARY

We consider all applicants for positions without regard to race, creed, color, national origin, ancestry, age, sex, disability, arrest or conviction record, sexual orientation, marital status, military service membership, use of lawful products, or other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is not a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable law and regulations.

PLEASE TYPE OR PRINT

POSITION(S) APPLIED FOR: _____ DATE: _____

REFERRAL SOURCE:

- WALK-IN
- GOVERNMENT EMPLOYMENT AGENCY
- PRIVATE EMPLOYMENT AGENCY
- EMPLOYEE
- RELATIVE
- SCHOOL
- ADVERTISEMENT SOURCE: _____
- OTHER: _____

NAME OF PERSON WHO REFERRED YOU (if applicable): _____

APPLICANT INFORMATION

NAME: _____ TELEPHONE # () _____

ADDRESS: _____

STREET

CITY

STATE

ZIP CODE

MALE

FEMALE

PLEASE CHECK ONE OF THE FOLLOWING EQUAL EMPLOYMENT OPPORTUNITY IDENTIFICATION GROUPS:

WHITE (NOT OF HISPANIC ORIGIN)

BLACK (NOT OF HISPANIC ORIGIN)

HISPANIC

AMERICAN INDIAN / ALASKAN NATIVE

ASIAN / PACIFIC

FOR ADMINISTRATIVE PURPOSES ONLY

POSITION(S) APPLIED FOR: AVAILABLE NOT AVAILABLE

OTHER POSITIONS CONSIDERED FOR: _____

HIRED? YES NO

POSITION HIRED FOR: _____ DATE OF HIRE: _____

FROM THE EEO JOB CLASSIFICATIONS LISTED BELOW, WHICH ONE BEST DESCRIBES THE POSITION FILLED?

OFFICIALS AND MANAGERS

SALES

OPERATIVES (SEMI-SKILLED)

PROFESSIONALS

OFFICE AND CLERICAL

LABORERS (UNSKILLED)

TECHNICIANS

CRAFT WORKERS (SKILLED)

SERVICE WORKERS

NOTES: _____

COMPLETED BY: _____ DATE: _____

Candidate Reference Check Authorization

Work References for:

 Print name

1. Name: _____
Company: _____
Phone: _____
Email: _____

2. Name: _____
Company: _____
Phone: _____
Email: _____

3. Name: _____
Company: _____
Phone: _____
Email: _____

Candidate Authorization

I authorize Angelo Luppino, Inc. or any designated representative of Angelo Luppino, Inc. to contact the above-named references regarding my past employment. I understand that Angelo Luppino, Inc. may ask questions about my educational background, work experience, achievements, wage history, performance, attendance and reason for separation from former employment.

I understand that any information provided by my references is to be used solely for the purpose of evaluating my candidacy for employment with Angelo Luppino, Inc.

I release all of the above-named references from any liability or claims related to the disclosure of information regarding my employment pursuant to this authorization, including, but not limited to, claims for defamation, interference with contract and negligence.

Candidate's Signature

Date