

				P	ERSON	IAL – <i>FIL</i>	L IN THE BLAI	NKS				
PLEASE IND	ICATE T	HE LOC	ATION IN	I WHICH YOU ARE	INTERES	STED:						
Name:				First		_Social Security No						
Las						City	MI	Sta	to	7in:		
						•				•		
Telephone:Cell:							Are you legally eligible for employment in the US? YES NO					
Position applied for:						In case of emergency, person to notify (next of kin):						
Date you are available to begin work:							Name:					
Are you willing to work flexible hours including weekends?							Address:					
Do you plan to work at another job while in our employ?							City/State/Zip:					
Are you interes	ested in			☐ Full Time	☐ Part	Time	Phone:	Phone:Relationship:				
Hours availab		rk·		- -								
DAY	210 to WO	MC	N_	TUE		WED	THU	FRI	SAT		SUN	
FROM												
TO												
Do you have a valid driver's license?							Have you ever been bonded?					
State: Number: Exp:							Have you ever been refused a bond? ☐ YES ☐ NO					
Restrictions on license:						If yes, explain:						
Has your license ever been revoked or suspended? ☐ YES ☐ NO							Have you ever be	en convicted of a crim	ne?	☐ YES	S 🗆 NO	
If yes, explain:						If yes explain (Criminal convictions will only be considered in relation to the job.)						
ii yes, expidii							п уез ехрипт (епт.	iniai convictions will only be cons	idered in relation to the			
			6.1.1.1								NO	
Have you ever been convicted of driving while intoxicated?							Do you use or sel	Il narcotics?		YES	S LINO	
Are you fluent in English?							Are you willing to	be tested for illegal dr	rugs?	TYES	S 🔲 NO	
			FDUA	CATION				DECEDENCE	S – List three			
Circle last year	Grad	uated?	EDUC	Name of So	chool		Name:	KEFEKENCE	23 – LIST UTLEE	Length of tim	ne known:	
completed Elementary	YES	NO		Locatio	n		Address:			Telephone:		
1 2 3 4							Address.			reiepriorie.		
5 6 7 8							Comments:					
High School 9 10							Name:			Length of tim	ne known:	
11 12							1					
College							Address:			Telephone:		
							Comments:		1			
Other									Ţ			
Other (Include professional						Name:			Length of time known:			
licenses							Address:			Telephone:		
						Comments						

MILITARY SERVICE												
Have you ever served in the armed forces of the United States?												
Branch of Service:			Date of Service:									
Rank or Rating at dis	scharge:			☐ YES ☐ NO								
MODIC EXPEDIENCE												
WORK EXPERIENCE (List most recent first.) Start Employer and Address Supervisor, Title, Phone Ending Salary Reason for leaving												
SldII	Empi	uyer and Address	Supervisor, Title, Priorie	Enuling Salary	Reason for leaving							
End												
Position and Responsibilities												
Start	Empl	oyer and Address	Supervisor, Title, Phone	Ending Salary	Reason for leaving							
Fad												
End												
Position and Responsibilities												
Start	Empl	oyer and Address	Supervisor, Title, Phone	Ending Salary	Reason for leaving							
End												
Position and Respor	nsibilities											
MEDICAL If injured on the job, will you accept the medical facilities recommended by your employer? ☐ YES ☐ NO												
		<u>`</u>										
I authorize investigations of all statements contained in the application. I understand that any misrepresentation or omission of facts is cause for dismissal. I authorize my former schools, employers, and personal references to provide information from my records, including dates of attendance, degrees earned, dates of employment, salary earned, reason for leaving employment, and all other information they may have concerning my performance. I authorize investigation of my motor vehicle operating history and criminal background. I understand that an unsatisfactory report may result in denial or termination of employment. I also agree to observe and comply with company policies, rules and regulations, and any violation may result in immediate termination. I release all parties providing information from any liability or claims for damages, including libel, slander, and invasion of privacy that may result from the disclosure of this information.												
Public Law 91-508 requires that we advise you that a routine inquiry may be made which will provide applicable information concerning character, general reputation, education, previous employment, and criminal background. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.												
Applicant's Signature:Date:												
It is our company policy not to discriminate against any employee or applicant for employment because of race, color, sex, age, disability, liability for service in the armed forces, or national origin. This policy includes but will not be limited to: EMPLOYMENT, DEMOTION, TRANSFER, RECRUITMENT, LAYOFF, TERMINATION, RATE OF PAY, and SELECTION FOR TRAINING.												
For office use an	dv	Interviewed by	nto									
For office use only:		Interviewed by:Date:										
		- Continuition										