

Application for Employment

Pre-employment Questionnaire – An Equal Opportunity Employer

Personal Information

Name (Last Name First)			Social Security No.	
Present Address	Apt.	City	State	Zip
Permanent Address	Apt.	City	State	Zip
Are you 18 years or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	Phone	Emergency Contact	Phone & Relationship	

Employment Desired

Position		Date you can start	Salary Desired
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, may we inquire of your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not until I have given my notice		Phone Number
Have you ever applied or worked for this company? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?	Separation Reason <input type="checkbox"/> Quit <input type="checkbox"/> Fired
Please Explain Separation			
Who referred you to this company? <input type="checkbox"/> Employment Agency <input type="checkbox"/> Newspaper Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> State Employment Office <input type="checkbox"/> Walk In <input type="checkbox"/> Other:			
Hours Desired: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Contingent <input type="checkbox"/> Full or Part Time			

Education & Training

SCHOOL LEVEL	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRAD.?	MAJOR & DEGREE
HIGH SCHOOL				
COLLEGE				
TRADE OR BUSINESS				

Service Record

Branch of Service	Discharge Date Rank

Previous Work Experience

Please list below the last three employers starting with the most recent first

Name of Present or last Employer			
Address		City	State Zip
Starting Date	Leaving Date	Job Title	
Starting Salary	Final Salary	May we contact your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:	
Description of work			
Reason for Leaving			

Name of Present or last Employer			
Address		City	State Zip
Starting Date	Leaving Date	Job Title	
Starting Salary	Final Salary	May we contact your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:	
Description of work			
Reason for Leaving			

Name of Present or last Employer			
Address		City	State Zip
Starting Date	Leaving Date	Job Title	
Starting Salary	Final Salary	May we contact your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain:	
Description of work			
Reason for Leaving			

References

Please give the names of three persons you are not related to, whom you have known at least one year

Name	Phone	Business	Years acquainted

Have you been convicted of a felony in the past 5 years? Yes No
If yes, explain:

Authorization

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.

I also acknowledge that this company reserves the right to require pre-employment and/or random drug testing.

This company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this company depends solely on your qualifications.

Signature of Applicant

Date

Do not write below – For interviewer’s use only

Interviewed by	Date
Comments	

Interviewed by	Date
Comments	

Hire Date & Dept.		For Position	
Salary Wages		Will Report	
Approved 1	Employment Manager	Date	
Approved 2	Department Manager	Date	

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