

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

DATE MONTH AND YEAR	NAME, ADDRESS, TELEPHONE NUMBER AND NAME OF IMMEDIATE SUPERVISOR OF FORMER EMPLOYER	SALARY/ HOURLY RATE	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

WHICH OF THE ABOVE JOBS DID YOU LIKE THE BEST? WHY? _____

WHICH OF THE ABOVE JOBS DID YOU LIKE THE LEAST? WHY? _____

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

	NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1				
2				
3				

IN CASE OF EMERGENCY NOTIFY _____

NAME ADDRESS PHONE NO.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

DATE _____ SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY _____ DATE _____

REMARKS: _____

HIRED _____ FOR DEPT. _____ POSITION _____ WILL REPORT _____ SALARY/WAGES _____

APPROVED 1 _____ 2 _____ 3 _____
 EMPLOYMENT MANAGER DEPT. HEAD GENERAL MANAGER