		APPLICA [*]	TION FOR EMI	PLOYMENT	Г		
Please Print:				Social Security Number Telephone Number			
				-	eguired)		
Last Name	First Name		Middle Initial				
Number	Street		City	State	County	Zip Code	
Applied For				From what source did you learn of this position?			
Are you 21 years of age	or older?						
			<u>-</u>	OL licensed?			
YES		NO	If yes, What	endorsen	nents?		
Have you any objection	of inquiry o	f vour nres	ent employer	regarding	vou charactrei	1 .	
qualifications, etc.?		YES	on compreyer	6	NO	,	
If YES, explain:	1	-					
Have you ever been co	nvicted of an	y law viola	tion other tha	n a minor	traffic violatio	n?	
YES YES		NO	If Y	ES, explai	n:		
				<u> </u>			
Will you accept employ		county?	Do you have dependable transportation?				
YES		NO			YES	NO	
Will you be available fo	r 24 hour cal	11?	What date	will vou be	available for o	employment?	
YES NO			Trial date	iiii you be	, available for t	,20	
			Month	Day		Year	
		EDU	JCATIONAL RE				
Highest Grade Complet	:ed:	_					
Grade School Attended				Location:			
High School Attended:					Location:		
Semester House of College: College Degree or Major:							
Business, Vocational, o			nded:				
Date of Graduation from	m High Schoo	ol:			From College:		
			Month/Year			Month/Year	
List Heavy Equipment S	KIIIS:						
		Λ.	ILITARY SERV	ICE			
Branch of Service and F	Rank:	Entered:	MEHAILI SEILV	Discharge	ed:	Type of Discharge:	
Present Selective Service	 ce Classificati	ion:					
Service Shool or Specia							
Notes:	ļ. 0 3 00.						

I CERTIFY THAT THE INFO TO THE BEST OF MY KNO FALSE STATEMENT IS TH EMPLOYMENT.	OWLEDGE AND BELIEF.	IN THE APP I UNDERSTA	LICATION IS CORRECTED THAT KNOWLING	T AND COMPLETE MAKING A	
TO THE BEST OF MY KNO FALSE STATEMENT IS TH	DRMATION CONTAINED DWLEDGE AND BELIEF.	IN THE APP I UNDERSTA	LICATION IS CORRECTED THAT KNOWLING	T AND COMPLETE MAKING A	
TO THE BEST OF MY KNO	DRMATION CONTAINED DWLEDGE AND BELIEF.	IN THE APP I UNDERSTA	LICATION IS CORRECTED THAT KNOWLING	T AND COMPLETE MAKING A	
	DRMATION CONTAINED	IN THE APP	LICATION IS CORREC	T AND COMPLETE	
I CERTIEV THAT THE INFO		-	•		
Name and Occupa		A	Telephone Number		
Personal References (No	ot Former Employers o	r Relatives)			
Relatives Presently Employed Here:		Rela	tionship	Department	
			,		
List membership in tech	nical, trade, or profess	sional groups	s:		
applied:	-	•	•	•	
List any volunteer work	you have done that yo	ou feel may b	e related to jobs for	which you have	
Position					
Supervisor					
Phone	Duties				
City/State	To:		Lowest:		
Address	From:	CIIC I CIIOU	Highest:	Mason for Leaving	
Employer	Fmnlovm	ent Period	Monthly Salary	Rason for Leaving	
Position					
Supervisor	Duties				
City/State Phone	Duties	· · · · · · · · · · · · · · · · · · ·			
-	To:		Lowest:		
Employer Address	Employme	ent Period	Monthly Salary Highest:	Rason for Leaving	
Position	F I		Ba - Ald Cala	D ()	
Supervisor					
Phone	Duties				
City/State	То:		Lowest:		
Address	From:		Highest:		
Employer	Employme	ent Period	Monthly Salary	Rason for Leaving	
Position					
Supervisor					
Phone	Duties				
City/State	To:		Lowest:		
Address	From:		Highest:		
Employer	Employme	ent Period	Monthly Salary	Rason for Leaving	