

EMPLOYMENT APPLICATION

Application information

Full name:

Last First M.I.

Date:

Address:

Street address Apt/Unit #

Phone:

Email:

City State Zip Code

Date Available:

S.S. no:

Desired Hr. Rate

\$

Dates Unable to
Work:

Are you a citizen of the United States?

Yes ☐

No ☐

If no, are you authorized to work in the U.S.?

Yes ☐

No ☐

Have you ever worked for this company?

Yes ☐

No ☐

If yes, when?

Have you ever been convicted of a felony?

Yes ☐

No ☐

If yes, explain?

Education

High school:

Address:

From:

To:

Did you graduate?

Yes ☐

No ☐

Diploma:

College:

Address:

From:

To:

Did you graduate?

Yes ☐

No ☐

Degree:

Other:

Address:

From:

To:

Did you graduate?

Yes ☐

No ☐

Degree:

References

Please list three professional references.

Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____
Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____
Full name:	_____	Relationship:	_____
Company:	_____	Phone:	_____
Address:	_____	Email:	_____

Previous Employment

Company:	_____	Phone:	_____
Address:	_____	Supervisor:	_____
Job title:	_____	From:	_____ To: _____
Responsibilities:	_____		
May we contact your previous supervisor for a reference?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Company:	_____	Phone:	_____
Address:	_____	Supervisor:	_____
Job title:	_____	From:	_____ To: _____
Responsibilities:	_____		
May we contact your previous supervisor for a reference?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Company:	_____	Phone:	_____
Address:	_____	Supervisor:	_____
Job title:	_____	From:	_____ To: _____
Responsibilities:	_____		
May we contact your previous supervisor for a reference?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Military Service

Branch:	_____	From:	_____ To: _____
Rank at discharge:	_____	Type of discharge:	_____
If other than honorable, explain:	_____		

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

Upon consideration for position I agree to obtain a valid Ohio Boater's License

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:	_____	Date:	_____
------------	-------	-------	-------