

**FOR OFFICE USE ONLY**

EMP. NO.

W4

WORKING PAPER #

POSITION APPLIED FOR:**PERSONAL INFORMATION:** (please print clearly)

NAME _____ First Middle Initial Last

SOC. SEC. # / TAX ID NO. _____

ADDRESS _____ CITY _____

STATE/PROVINCE _____ ZIP/POSTAL CODE _____

TELEPHONE (_____) _____

Are you 16 years of age or over? Yes No (Proof of age or a work permit may be required.)

In Case of Emergency Notify:

NAME _____

TELEPHONE (_____) _____

ADDRESS _____ CITY _____

STATE/PROVINCE _____ ZIP/POSTAL CODE _____

AVAILABILITY :Are you legally able to be employed in this country? Yes No (If hired, verification will be required by law)What type of position are you seeking? Part time Full time Seasonal TemporaryAre you able to meet the attendance requirements of the position? Yes No**HOURS AVAILABLE:**

MON	TUE	WED	THUR	FRI	SAT

SCHOOL MOST RECENTLY ATTENDED :

NAME _____

ADDRESS _____ CITY _____ STATE _____

GRADUATED? Yes No NOW ENROLLED? Yes No

MOST RECENT EMPLOYMENT :

NAME _____

ADDRESS _____ CITY _____ STATE _____

TELEPHONE (_____) _____

Position _____

Supervisor _____ TELEPHONE (_____) _____

Dates worked: From _____ To _____

Reason for leaving : _____

Do we have your permission to contact your current employer? Yes No If NO, please explain:

REFERENCES: (Please do not use family members)

Name: _____ Telephone: (_____) _____

Years Known _____

Address _____ City _____ State _____

Name: _____ Telephone: (_____) _____

Years Known _____

Address _____ City _____ State _____

PLEASE TELL US A LITTLE BIT ABOUT YOURSELF!

I CERTIFY THAT I HAVE READ AND FULLY COMPLETED BOTH SIDES OF THIS APPLICATION AND THAT THE INFORMATION CONTAINED HEREIN IS CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ANY OMISSION OR FALSE INFORMATION IS GROUNDS FOR DISMISSAL. I AUTHORIZE THE REFERENCES LISTED ON THIS APPLICATION TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND PERTINENT INFORMATION THEY MAY HAVE, PERSONAL AND OTHERWISE. I UNDERSTAND THAT AS A PART OF THE PROCEDURE FOR MY EMPLOYMENT APPLICATION AN INVESTIGATIVE CONSUMER REPORT MAY BE MADE CONCERNING MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS AND MODE OF LIVING.

SIGNATURE _____

DATE _____