

Application for Employment

Date:
Employer Name:
Job Order #:

APPLICANT INFORMATION

Last Name		First Name	M.I.
Street Address			Apartment/Unit #
City		State	ZIP
Home Phone	Cellphone	Email Address	
Position Applied For			
Are you authorized to work in the U.S.? YES <input type="radio"/> NO <input type="radio"/>			
Have you ever worked for this company? YES <input type="radio"/> NO <input type="radio"/> If so, when?			
Are you over the age of 18? YES <input type="radio"/> NO <input type="radio"/>		Are you over the age of 21? YES <input type="radio"/> NO <input type="radio"/>	

EDUCATION

Do you possess a high school diploma or GED? YES <input type="radio"/> NO <input type="radio"/>			
School Name/Address/City/State			
Post-Secondary School Name	Address		
From	To	Did you graduate? YES <input type="radio"/> NO <input type="radio"/>	Degree
List all relevant licenses, certifications or registrations you possess. Also identify other educational experience relevant to the position you are applying for.			

REFERENCES

Please list three professional references.

Full Name	Relationship
Address	Phone
Full Name	Relationship
Address	Phone
Full Name	Relationship
Address	Phone



PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	From	To	Reason for Leaving
Skills Learned			
May we contact your previous supervisor for a reference? YES <input type="radio"/> NO <input type="radio"/>			

Company		Phone	
Address		Supervisor	
Job Title	From	To	Reason for Leaving
Skills Learned			
May we contact your previous supervisor for a reference? YES <input type="radio"/> NO <input type="radio"/>			

Company		Phone	
Address		Supervisor	
Job Title	From	To	Reason for Leaving
Skills Learned			
May we contact your previous supervisor for a reference? YES <input type="radio"/> NO <input type="radio"/>			

MILITARY SERVICE

Branch	From	To
Did you serve on active duty? YES <input type="radio"/> NO <input type="radio"/>	Type of Discharge	

DISCLAIMER AND SIGNATURE

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize the employer to investigate and verify all statements contained in this application and supporting materials.

Signature	Date
-----------	------



Your workforce experts.
www.sdjobs.org

EMPLOYMENT APPLICATION ADDENDUM

EMPLOYMENT APPLICATION CONSENT RELEASE: **Background Check**

I hereby certify that the facts set forth in the completed employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application may result in dismissal. I release and hold harmless any person, firm, or entity that discloses matters in accordance with this authorization, as well as from liability that might otherwise result from the request for use of and/or disclosure of any or all of the foregoing information. You are hereby authorized to make any investigation of my personal history academic/professional credentials, military service records, criminal, driving, financial and credit record through any investigative or credit bureaus of your choice.*

Section 604 (b) of FCRA Provides Conditions for Furnishing and Using Consumer Reports for Employment Purposes.

Print Name:

First

Middle

Last

Signature: _____

Today's Date: _____

Social Security #: _____ - _____ - _____

Date of Birth: _____

Driver License #: _____

Current Address:

Current County of Residence:

Previous Address:

List All States That You Have Resided In:

The EEOC states for the purpose of pre-employment inquires, under the Age Discrimination in Employment act of 1967, section 1625.6, "A request on the part of an employer for information such as "DATE OF BIRTH" or "STATE AGE" on an employment application form is not, in itself, a violation of the act."