

EMPLOYMENT APPLICATION

Personal Info	rmatio	n			
Name (Last, Firs	t, MI)			DOB:	
Street address					
City, State, Zip					
Home phone nur	nber		Work phone m	umber	
Fax number			E-mail address	;	
Social security m	umber		Driver's licens	e number/state/e	xpiration
E	Dogino	J	·		
Employment Position applied		0			
How did you hea	ur about 1	this position?			
Date available fo	or work	Desired hours (fi	ull time, part time	e, etc.) Desired	Salary
Education					
	Name	and Address of School	Course of Study	Total Years of Study	Degree/ Diploma
High School			5		
Undergraduate College					
Graduate/ Professional					

Other					
(Specify)					
List any seminars	s, classes or other education	on not listed above	which may help	o qualify	
you for this posit	ion (if you need additiona	al space, please use	page 7):		
					1

Employment Application

Employment History

List below all present and past employers over the past ten years, starting with your **most recent** employer. Account for all periods of unemployment. You must complete this section even if attaching a resume. May we contact your current employer? VES NO

1.	Employer (current 🗆 Yes 🗆 No)		Start	End	Essential job functions of
			Date	Date	final position
	Address				
					1.
	City, State, Zip		Starting	Ending	
			Salary	Salary	2.
	Phone number				
					3.
	Fax number	Supervisor(s)			
					4.
	Job position(s)	E-mail add	dress of sup	ervisor	
	Reason(s) for leaving				•
	What value did you add to this	company or	its custome	rs?	
		1.			

2.

Employer		Start	End	Essential job functions of
		Date	Date	final position
Address				
				1.
City, State, Zip		Starting	Ending	
		Salary	Salary	2.
Phone number				
				3.
Fax number	Supervisor	r(s)	4	
				4.
Job position(s)	E-mail add	dress of sup	pervisor	
Reason(s) for leaving				

What value did you add to this company or its customers?

Employment Application

Employment History

- 3. Employer Essential job functions of End Start Date Date final position Address 1. City, State, Zip Ending Starting Salary Salary 2. Phone number 3. Fax number Supervisor(s) 4. Job position(s) E-mail address of supervisor Reason(s) for leaving What value did you add to this company or its customers?
- 4.

Employer		Start	End	Essential job functions of
		Date	Date	final position
Address				
				1.
City, State, Zip		Starting	Ending	
		Salary	Salary	2.
Phone number			-	
				3.
Fax number	Supervisor	r(s)	<u>.</u>	
				4.
Job position(s)	E-mail address of supervisor			
Reason(s) for leaving	<u>.</u>			•
What value did you add to this o	company or	its custome	ers?	

Employment Application

Employment History

5.	Employer		Start Date	End Date	Essential job functions of final position
	Address	Date	Date		
			Starting	Ending	1.
	City, State, Zip	City, State, Zip			2.
	Phone number				3.
	Fax number	Supervisor	r	1	4.
	Job position(s) E-mail addr		dress of supervisor		4.
	Reason(s) for leaving				
	What value did you add to this	company or	its custome	ers?	
	what value did you add to this				
6.	Employer		Start Date	End Date	Essential job functions of final position
	Address				1.
	City, State, Zip		Starting	Ending	
			Salary	Salary	2.
	Phone number				3.
	Fax number	Supervisor	r		4.
	Job position(s) E-mail add		dress of sup	pervisor	
	Reason(s) for leaving				I
	What value did you add to this	company or	its custome	ers?	

Employment Application					
Additional Information					
List any professional, trade, business or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, ancestry, age, disability or any other protected status.		English that you or	an speak read or write t	hat could be of benefit to	
the position applied for		English that you ea	an speak, read of write t	hat could be of benefit to	
		Fluent	Good	Fair	
Speak					
Read Write					
write					
Identify formal job training that relates to this position:					
Identify what skills or certification you possess related to this position:					
If you are hired, what value would you add to our company?:					
Describe what you believe are the most unique features of your work history:					

Employment Application Additional Information Have you ever been employed with this company before? \Box Yes \Box No _____ If Yes, when? Do you have any friends or relatives employed by this company? \Box Yes \Box No If Yes, please provide their names and relationship to you: Are you currently employed? \Box Yes \Box No May we contact your employer? \Box Yes \Box No Are you currently on "lay off" status and subject to recall? \Box Yes \Box No If you are under 18 years of age, can you provide proof of your eligibility to \Box Yes \Box No work? If hired, can you provide proof of U.S. citizenship or proof of your legal right \Box Yes \Box No to work in the U.S.? Are you able to perform all of the essential functions of the job for which you \Box Yes \Box No are applying with or without reasonable accommodation? If hired, are there any accommodations the company would need to provide so \Box Yes \Box No that you can perform all those essential functions and duties of the position being applied for? If Yes, please explain: If driving is a requirement of the position applied for, have you in the last 7 \Box Yes \Box No years been convicted of Driving Under the Influence "(DUI)" \Box N/A If hired, do you have a reliable means of transportation to and from work? □ Yes □ No If hired, would you be able to travel or work overtime as needed? □ Yes \Box No Have you ever been convicted of a felony or misdemeanor? □ Yes □ No If Yes, please explain:

INSTRUCTIONS FOR ANSWERING APPLICATION QUESTION ABOUT BEING CONVICTED OF A CRIME OR OTHER STATE-SPECIFIC REQUIREMENTS

A criminal record does not constitute an automatic bar to employment and will be considered only as it substantially relates to the job in question. If you are applying for a position with our company in the following states, please read the following instructions before responding.

- AZ Do not provide information concerning:
 - (1) any conviction for which the record has been judicially ordered sealed, expunged or statutorily eradicated. or:,
 - (2) any misdemeanor conviction for which probation has been completed or discharged and the case has been judicially dismissed.

References

List below three persons not related to you who have knowledge of your work performance within the last 5 years.

Name		Occupation
Company name	Address	I
Telephone	E-mail	Relationship & years acquainted
Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted
Name		Occupation
Company name	Address	i
Telephone	E-mail	Relationship & years acquainted

Additional Space
Additional space provided to expand on any points or questions asked previously in this application

Signature: _____ Date: _____