

APPLICATION FOR EMPLOYMENT

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

Personal Information

Today's Date: _____

Name (Last, First, Middle Initial)		Social Security # - -	
Is there any information we would need about your name, or use of another name, for us to be able to check your work record? Yes <input type="checkbox"/> No <input type="checkbox"/> Please Specify:			
Present Address	City	State	Zip
Permanent Address	City	State	Zip
Phone Number (Primary)	Email		
Phone Number (Secondary) <i>optional</i>			
For the purposes of operating equipment, are you 18 years or older?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you have a valid drivers license?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you eligible to work in the United States?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Employment Desired

Position	Start Date	Salary Desired
Type of work desired? Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal <input type="checkbox"/>		
Are you employed now? If so, where:	May we inquire of your present employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Have you applied to this company before? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, when?	
How were you referred to our organization?		

Former Employers (List below your last three employers, last one first)

Date Month and Year	Name and Address of Employer	Phone #	Salary	Position
From				
To				
Reason for leaving				
From				
To				
Reason for leaving				
From				
To				
Reason for leaving				

Name and Location of School	Number of	
	Years Completed	Degree/Diploma
High School		
College		
Technical or Other		

Please list any additional information that relates to your ability to perform the job for which you have applied – such as licenses, professional memberships, hobbies, etc.

How do you feel your qualifications will contribute to the success of Starlight?

References (List the names of three persons not related to you, who have known you for at least one year)

Name	Address	Phone	Business	Years Acquainted

“I certify that the facts contained herein are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing the same to you. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and/or salary, be terminated at any time without prior notice.”

Date: _____ Signature: _____

APPLICANTS PLEASE DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: _____ DATE: _____

STARTING DATE: _____ RATE: _____ POSITION: _____

OTHER COMMITMENTS: _____

APPROVED BY: _____