

PARMENTER, INC. - APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

TODAY'S DATE: _____

NAME (LAST NAME FIRST)		SOCIAL SECURITY NO. - -	
PRESENT ADDRESS	CITY	STATE	ZIP CODE
PERMANENT ADDRESS	CITY	STATE	ZIP CODE
PHONE NO.		REFERRED BY	

EMPLOYMENT DESIRED

POSITION		DATE YOU CAN START	SALARY DESIRED / <input type="checkbox"/> Hr or <input type="checkbox"/> Wk
ARE YOU EMPLOYED? <input type="checkbox"/> Yes <input type="checkbox"/> No	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> Yes <input type="checkbox"/> No	HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> Yes <input type="checkbox"/> No	WHEN?

EDUCATION HISTORY

NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
HIGH SCHOOL		<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE		<input type="checkbox"/> Yes <input type="checkbox"/> No	
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL		<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER SCHOOLS OR SPECIAL COURSES		<input type="checkbox"/> Yes <input type="checkbox"/> No	

MILITARY SERVICE HISTORY

BRANCH OF MILITARY	DATES OF SERVICE
COMMENTS (SPECIAL SKILLS, SCHOOLING, ETC.)	

Are you 18 years of age or older? Yes No If under 18, state your age _____

Are you a U.S. Citizen? Yes No If not, do you have a legal right to work in this country? Yes N

FORMER EMPLOYERS: (BEGIN WITH YOUR MOST RECENT POSITION AND PROVIDE AN ACCURATE SUMMARY OF YOUR DUTIES. IF MORE SPACE IS REQUIRED, USE ADDITIONAL SHEETS ARRANGED IN SAME MANNER. ATTACH SHEETS TO BACK OF APPLICATION. ACCOUNT FOR ALL PERIODS OF UNEMPLOYMENT).

NAME AND ADDRESS OF EMPLOYER				TYPE OF BUSINESS	
DATES EMPLOYED FROM ___/___/___ TO ___/___/___		STARTING TITLE		PRESENT OR LAST TITLE	
NAME OF LAST SUPERVISOR	TELEPHONE NO.	MAY CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO	STARTING SALARY \$ _____ PER _____	PRESENT OR LAST SALARY \$ _____ PER _____	
DESCRIPTION OF DUTIES					
REASON FOR LEAVING					

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DATES EMPLOYED FROM ___/___/___ TO ___/___/___		STARTING TITLE		PRESENT OR LAST TITLE	
NAME OF LAST SUPERVISOR	TELEPHONE NO.	MAY CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO	STARTING SALARY \$ _____ PER _____	PRESENT OR LAST SALARY \$ _____ PER _____	
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NAME OF LAST SUPERVISOR	TELEPHONE NO.	MAY CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO	STARTING SALARY \$ _____ PER _____	PRESENT OR LAST SALARY \$ _____ PER _____	
DESCRIPTION OF DUTIES					
REASON FOR LEAVING					

REFERENCES (DO NOT LIST RELATIVES OR SUPERVISORS PREVIOUSLY GIVEN IN THE EMPLOYMENT HISTORY SECTION).

NAME	ADDRESS & PHONE NUMBER	BUSINESS	YEARS KNOWN

GENERAL INFORMATION

Have you ever been convicted of a felony? Yes No (The existence of a criminal record does not constitute an automatic bar to employment.) If Yes, give dates, location, disposition _____

AUTHORIZATION

I certify that the facts contained in this application 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 and employers 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 the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

DATE _____ SIGNATURE _____

INTERVIEWED BY _____ DATE _____

We are an equal opportunity employment company. We are dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion, national origin, disability, marital status, or criminal record in connection with employment.