

ABC DESIGN COMPANY PRACTICE JOB APPLICATION

Last Name	First	Middle	Social Security Number XXX-XX-XXXX
Present Address (Street, City, State)		Zip	Home Phone (Area Code, Number) Email Address
Describe the type of employment you desire Part-Time_____ Full-Time_____ Position _____			
<p>Are you either a U.S Citizen or able to submit proof of legal eligibility to work? Yes_____ No_____</p> <p>(Note: Original Documentation will be required at time of hire to comply with provision of the Immigration Reform Act of 1986)</p> <p>Are you 18 years of age or older? Yes_____ No_____</p> <p>Have you ever been employed by ABC Graphic Design Company? If yes, please list below</p> <p>Location _____ From _____</p> <p>To _____</p> <p>Do you have a relative who has ever been employed by ABC Design Company? Yes_____ No _____</p> <p>If so, Location _____</p> <p>How were you referred to ABC Design Company? _____</p>			

Academic Training

School Name	City, State	Attended From-To MO/YR	Major Course of Study	Graduation Date	Degree or Certificate
High School					
College(s)					
Graduate School					
Other Technical or Business Education					

Please list specific extracurricular activities, military, offices, honors, or awards that reflect upon your ability to perform the position applied for.

Professional Certification

Do you possess any professional certifications? Yes_____ No_____

If yes, what certification do you hold and by what organization are you certified?

Employment History

Please complete in detail starting with the present or most recent employer. Account for all full-time and part-time positions for a minimum of ten years. Resumes are no substitute. If you have used another name for employment purposes during this period, please indicate in the remarks section. Add additional sheets if necessary.

Employer (Present or most recent)	Street Address, City, State, Zip	
Supervisor (Name and Title)	Your Job Title	
Description of your Duties	From (MO/YR)	To (MO/YR)
Base Rate*		
	\$	Per
Reason for Leaving:	Bonus or Other	
May we contact this employer for references?	Yes_____ No_____	
Employer's Telephone Number	Area Code ()	

Employer (Present or most recent)		Street Address, City, State, Zip	
Supervisor (Name and Title)		Your Job Title	Telephone: ()
Description of your Duties		From (MO/YR)	To (MO/YR)
Base Rate*			
		\$	Per
Reason for Leaving:		Bonus or Other	
May we contact this employer for references?		Yes_____ No_____	

Employer (Present or most recent)		Street Address, City, State, Zip	
Supervisor (Name and Title)		Your Job Title	Telephone: ()
Description of your Duties		From (MO/YR)	To (MO/YR)
Base Rate*			
		\$	Per
Reason for Leaving:		Bonus or Other	
May we contact this employer for references?		Yes_____ No_____	

Employer (Present or most recent)		Street Address, City, State, Zip	
Supervisor (Name and Title)		Your Job Title	Telephone: ()
Description of your Duties		From (MO/YR)	To (MO/YR)
Base Rate*			
		\$	Per
Reason for Leaving:		Bonus or Other	
May we contact this employer for references?		Yes_____ No_____	

Base pay is your basic rate of pay excluding overtime premiums, special bonuses or allowances. The rates you indicate may be checked with former employers.

References

List three persons familiar with your professional ability whom we may contact. Please exclude relatives.

<u>Name</u> <u>Number</u>	<u>Organization/Job Title</u>	<u>Relationship</u>	<u>Email Address</u>	<u>Telephone</u>
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1. _____

2. _____

3. _____

Remarks

(Please include any other information you think would be helpful to us in considering you for employment.)

I certify that the information I have provided on this employment application is true and complete, and that there is no information I have omitted or failed to include. I authorize ABC Design Company to verify all the information I have provided. I authorize any person, school, employer (including my present employer), or organization to provide ABC Design Company with information and opinion, and I release both ABC Design Company and all such sources from any liability arising from the solicitation, provision or use of such information. If employed, I will comply with the rules and regulations of ABC Design Company and its subsidiaries. I understand that neither this employment application nor any other ABC Design Company documents constitute a contract. Unless covered by a collective bargaining agreement to which ABC Design Company is a party, or by either a faculty letter of appointment or written agreement signed by an officer of ABC Design Company changing at-will status, my employment will be at-will. I understand that as an at-will employee I can be discharged at any time and for any reason. I agree that any false information or omissions on this employment application will be the basis for disqualifying me from consideration for employment and, if employed, for my discharge from that employment.

Applicant Signature

Date