

# EMPLOYMENT APPLICATION

Template

## APPLICATION FOR EMPLOYMENT

Your Company Name  
Your Address, City, State, Zip  
111-222-3333

PERSONAL INFORMATION			
LAST NAME	FIRST NAME	MIDDLE INITIAL	SOCIAL SECURITY NO.
ADDRESS	CITY	STATE	ZIP
PHONE NO	SECONDARY PHONE NO	EMAIL ADDRESS	

EMPLOYMENT DESIRED		
POSITION APPLYING FOR	DATE YOU CAN START	SALARY DESIRED
ARE YOU LEGALLY AUTHORIZED TO WORK IN THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO	EMPLOYMENT DESIRED <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SEASONALLY	

EDUCATION			
HIGH SCHOOL	LOCATION	YEARS ATTENDED	GRADUATED <input type="checkbox"/>
TRADE SCHOOL	LOCATION	YEARS ATTENDED	GRADUATED <input type="checkbox"/>
COLLEGE	LOCATION	YEARS ATTENDED	GRADUATED <input type="checkbox"/>
GRADUATE SCHOOL	LOCATION	YEARS ATTENDED	GRADUATED <input type="checkbox"/>

PREVIOUS EMPLOYMENT			
EMPLOYER	DATES EMPLOYED	POSITION	
JOB DUTIES	REASON FOR LEAVING	PAY	