

EMPLOYMENT APPLICATION (U.S.)

An Equal Opportunity Employer

This form is general in nature—please check local and state laws for your area for compliance.

PERSONAL

Social Security Number	Last Name	First Name	Middle Name
Current Mailing Address	Street	City	State Zip
Permanent Address (if different from above)	Street	City	State Zip
Phone	Are You 18 or Older <input type="checkbox"/> Yes <input type="checkbox"/> No, if not, age _____		

I am (check a box):

- A citizen or national of the United States.
- An alien lawfully admitted for permanent residence (Alien Number A _____).
- An alien authorized by the Immigration and Naturalization Service to work in the United States (Alien Number A _____ or Admission Number _____, Expiration of employment authorization, if any _____).

POSITION APPLYING FOR

Hours Available	M	T	W	T	F	S	S	Are You Interested In: <input type="checkbox"/> Full <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Summer <input type="checkbox"/> Other (specify) _____ Total Hours Available Per Week _____
From								
To								
Date Available	Salary Acceptable		Per. Hc		Per. Mo.		Have You Ever Worked for a fast food franchise before? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, for Whom _____ From / / To / /	
Who Referred You To This Job?								
Address							Phone	
Have You Ever Been Convicted For Other Than A Minor Traffic Violation? (This information may be considered in hiring or job placement, but will not automatically disqualify you for employment). <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Explain: _____								

EDUCATION

Highest Grade Completed	Post-Secondary	Other (specify)	Grade Point Average
7 8 9 10 11 12	1 2 3 4		

ACTIVITIES

Class Organizations, Scholastic Honors and Other School Activities (At your option, you may exclude organizations which indicate race, creed, color, national origin or religion).
Hobbies and Recreational Interests

EMPLOYMENT RECORD

Name & Address of Present Employer					Employment Dates From / / To / /	
Supervisor's Name	Title	Phone	Position	Starting Salary	Final Salary	
Reason For Leaving			May We Contact This Employer <input type="checkbox"/> Yes, Immediately <input type="checkbox"/> Yes, At a Later Date <input type="checkbox"/> No, Do Not Contact			
Name & Address of Most Recent Employer (other than present if applicable)					Employment Dates From / / To / /	
Supervisor's Name	Title	Phone	Position	Starting Salary	Final Salary	
Reason For Leaving			May We Contact This Employer <input type="checkbox"/> Yes, Immediately <input type="checkbox"/> Yes, At a Later Date <input type="checkbox"/> No, Do Not Contact			
In Case of an Emergency Contact					Phone	