

## AN EQUAL OPPORTUNITY EMPLOYER

## STATE & FEDERAL LAW PROHIBITS DISCRIMINATION BASED ON AGE, SEX OR NATIONAL ORIGIN

PERSONNEL					BASED ON	BASED ON AGE, SEX OR NATIONAL ORIGIN	CNAL CRIGIN
NAME (LAST, FIRST, MIDDLE)					SOCIAL S	SOCIAL SECURITY NO.	TOTAL NO OF TAX EXEMPTI
ADDRESS STREET	CITY	STATE	ZIP		HOME PHONE	HONE	ALT. PHONE
CITY & STATE OF BIRTH		CITIZEN OF US	ALIEN REG. #		ALIEN REG. EXP. DATE	SMOKER YES   NO	E-MAIL ADDRESS
IN CASE	IN CASE OF EMERGENCY NOTIFY - NAME		ADDRESS	SS		TELEPHONE	NE I
WHAT POSITION ARE YOU APPLYING FOR	FOR DATE AVAILABLE FOR WORK	$-\parallel$	MINIMUM RATE PER HOUR	HAVE YOU OF A FELONY	HAVE YOU EVER BEEN CONVICTED	NO	HOW DID YOU HERE ABOUT US
WHICH DAYS ARE YOU AVAILABLE TO WORK FULL TIME MON TUE WED THU FRI SAT SAT	THU FRI SAT SUN		CITIES AVAILABLE TO WORK IN	SHIFT 1st 2nd	3rd	AVAILABLE LONG TERM ASSIGNMENT WILL ACCEPT SAME DAY ASSIGNMENT TEMP TO HIRE CAR AVAILABLE CAR AVAILABLE CAR AVAILABLE YES	ASSIGNMENT YES NO N
TEST RESULTS  SPEED ERRORS  SOFTWARE	WORK SKILLS CHECK YOUR SKILLS AND THE KIND OF WORK YOU HAVE DONE TYPING WPM DATA ENTRY BUSINESS MACH. CLERIC MEMORY ALPHA JADDING MACH JELING	LLS AND THE KIND O	BUSINESS MACH.	E DONE CLERICAL JFILING ALPHA	NUMERIC	COMPUTERS	MAC PC
ALPHA ALPHA NUM 10 KEY CLERICAL # WRONG 1st	ELECTRIC  STENCILS/MASTER  STATISTICAL INVOICING/BILLING STENO TRANSCRIBER COMPUTER SOFTWARE  ELECTRIC RECEI	S LINES STIONIST STORY OTHER	FAX POSTAGE METER CALCULATORS IDS HER	BULK MAIL TELE CUSTOMER SERVICE BOOKKEEPING FULL CHARGE A ACCTS. PAY MANUAL PAYROLL PAYROLL PECONCILIATIONS	TELEMARKETING FING ASSISTANT ACCT. REC. COMPUTER COLLECTIONS S TAXES	STENOGRAPHIC APPROX. SPEED LEGAL STENO TRANSCRIBING FOREIGN LANGUAGES SPEAK READ OTHER	OGRAPHIC  WPM  PROX. SPEED  LEGAL STENO  TRANSCRIBING MACHINES KINDS  GN LANGUAGES  EAK  READ  WRITE  WHM  WPM  WPM  WPM  WPM  WPM  WPM  WPM
PREVIOUS EMPLOYMENT	NAME OF EMPLOYER	PHONE OR ADDRESS	ADDRESS	SUPERVISOR	PAY P/HOUR	POSITION	REASON FOR LEAVING
FROM TO							
EDUCATION NAME OF SCHOOL	SCHOOL DEGREE	YR. OF GRAD.	HAVE YOU E	HAVE YOU EVER WORKED FOR OR IF YES, PLEASE LIST THE FIRMS AT	HAVE YOU EVER WORKED FOR OR APPLIED WITH A TEMPORARY SERVICE IF YES, PLEASE LIST THE FIRMS AT WHICH YOU WORKED AS A TEMPORARY.	ORARY SERVICE AS A TEMPORARY.	YES NO
COLLEGE BUSINESS OR			FIRM NAME & ADDRESS:	5.			
OTHER							

I hereby authorize you and all former employers, and others given by me as reference, to answer all questions and give all information in connection with this application or in any way concerning me. I agree, if employed by you, that if ever I make claims against you for personal injuries, upon your request I shall submit to drug screens and examinations by physicians of your selection. Your employment of me may be terminated by you at any time without any liability to me except for wages and salary as have been earned by me at the date of such termination. I understand that it is my responsibility to notify you of my availability on a weekly basis at a minimum, and if I do not, I will be considered unavailable for work.

DATE:

SIGNATURE: