

101 W Main St Mascoutah, IL 62258 618-566-2343

Employment Application

		Applicant	Informa	tion			
Full Name:				DOB:			
i dii ridiiio.	Last	First			M.I.	MM/DD/YYYY	
Address:							
ridaress.	Street Address					Apartment/Unit #	
	City				State	ZIP Code	
ci	ircle						
Phone: cell c	or home		Email				
Date Availab	ole:	Social Security No.:				l Salary: \$	
Position App	olied for:						
Are you a citizen of the United States? YES NO			YES NO If no, are you authorized to work in the U.S.?				
YES NO Have you ever worked for this company? If yes, when?							
YES NO Have you ever been convicted of a felony?							
If yes, explain:							
		Educ	cation				
High School	:	Address	. <u> </u>				
From:	To:		YES	NO			
College:		Address	:				
From:	To:	Did you graduate?	YES	NO	Degree:		
Other:		Address	: <u> </u>				
From:	То:	Did you graduate?	YES	NO	Degree:		

General Information					
Subjects of Special Study/Research Work:					
Special Training:					
Special Skills:					
	Military Service				
Branch:	From:	To:			
B 1 (B) 1	T (D)				
Rank at Discharge:	Type of Discharge:				
If other than honorable, explain:					
	References				
	Kererenees				
Please list three professional and/or personal re-	ferences.				
Full Name:	Relationship	:			
Company:	Phono	:			
Company:	Phone				
Address:					
Full Name:	Relationship	1			
Company:	Phone	:			
Address:					
Full Name:	Ralationshin	:			
Full Name:		·-			
Company:	Phone	:			
Address:					

Previous	Employment				
Company:				Phone:	
Company.				Thoric.	
Address:				Supervisor:	
Job Title:	Starting S	Ending Salary:\$			
Responsibil	ities:				
From:	To: Reason for Leaving:				
May we con	stact your previous supervisor for a reference?	YES	NO		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S	alary: <u>\$</u>		Ending Salary:\$	
Responsibil	ities:				
From:	To:	Reason f	or Leaving:		
May we con	stact your previous supervisor for a reference?	YES	NO		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting Salary:			Ending Salary:	
Responsibil	ities:				
From:	To:	Reason f	or Leaving:		
May we con	stact your previous supervisor for a reference?	YES	NO		

Disclaimer and Signature

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 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.

Signature:		Date:					
	<i>D</i> (O NOT WRITE	BELOW T	HIS LINE			
Interviewed By:				Date:			
<u>Neatness</u>			Character				
Personality			Ability				
Hired	For Dept	Position	1	Will Report	Salary Wages		
Approved: 1		2 Departn		3	General Manager		