

FORT MITCHELL PUBLIC HOUSE
APPLICATION FOR EMPLOYMENT

Pre-employment Questionnaire
 Equal Opportunity Employer

<u>PERSONAL INFORMATION</u>			
Name (Last name, first)		Social Security No.	
Present Address	City	State	Zip Code
Phone Number ()		Referred by	

<u>EMPLOYMENT DESIRED</u>		
POSITION	DATE YOU CAN START	SALARY DESIRED

ARE YOU EMPLOYED?	Can we contact present employer?	
<input type="checkbox"/>		

NAME AND LOCATION OF SCHOOL	Did you graduate?	Subjects studied
Grammar School		
High School		
Trade, Business, or College		

GENERAL
SUBJECTS OF SPECIAL STUDY/ RESEARCH WORK OR SPECIAL TRAINING OR SKILLS

US Military or Naval Service

FORMER EMPLOYERS				
<u>LIST BELOW AT LEAST THREE FORMER EMPLOYERS. STARTING WITH THE LAST ONE FIRST</u>				
DATE (MO. and YR.)	Name and Address of Employer	Salary	Position	Reason for Leaving
From _____				
To _____				

From _____				
To _____				

From _____

To _____

REFERENCES

GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN FOR AT LEAST 1 YEAR.

Name	City	Phone	Business	Years Known

AUTHORIZATION

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 MAY 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 THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE.

Signature: _____

Date: _____

DO NOT WRITE BELOW THIS LINE

REMARKS

