

Employment Application

Your Contact Information

First Name

Last Name

Driver's License #

Address

E-mail Address

Phone

What Position are you applying for?

Date Available to Start

Expected Salary

Are You Currently Employed? YES
 NO

If so, can we contact your current employer? YES
 NO

Education

Highest level of education attained? High School
 Technical or Trade School
 College

Subject Studied?

Did you Graduate? YES
 NO

Date of Graduation

Previous Employers (Please list information for last 3 employers)

Employer Name

Address

Phone

Dates of Employment

Direct Supervisor

Position Held

Starting Salary

Ending Salary

Reason for Leaving

Employer Name

Address

Phone

Dates of Employment

Direct Supervisor

Position Held

Starting Salary

Ending Salary

Reason for Leaving

Employer Name

Address

Phone

Dates of Employment

Direct Supervisor	<input type="text"/>
Position Held	<input type="text"/>
Starting Salary	<input type="text"/>
Ending Salary	<input type="text"/>
Reason for Leaving	<input type="text"/>

Additional Skills & Abilities (machines able to operate and proficiency at that operation)

please list skills here:

References (List 3 references: Not family, whom you have known at least one year)

Name	<input type="text"/>
E-mail Address	<input type="text"/>
Phone	<input type="text"/>

Name	<input type="text"/>
E-mail Address	<input type="text"/>
Phone	<input type="text"/>

Name	<input type="text"/>
E-mail Address	<input type="text"/>
Phone	<input type="text"/>

Please e-mail this form to Patty Sanders, President

patty@aamachine1.com

We are an equal opportunity employer.