



Location: \_\_\_\_\_  
Position: \_\_\_\_\_

**APPLICANT INFORMATION**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Apt. #*  
\_\_\_\_\_  
*City State Zip*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date Available: \_\_\_\_\_ Soc. Sec. No.: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Position Applied For: \_\_\_\_\_ Driver License No.: \_\_\_\_\_

Are you a citizen of the United States?  Yes  No  If no, are you authorized to work in the U.S.?

Have you ever worked for this company?  Yes  No  If so, when? \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No  If yes, explain: \_\_\_\_\_

**EDUCATION**

High School: \_\_\_\_\_ City, State: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ When? \_\_\_\_\_ Degree: \_\_\_\_\_

College: \_\_\_\_\_ City, State: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ When? \_\_\_\_\_ Degree: \_\_\_\_\_

Other: \_\_\_\_\_ City, State: \_\_\_\_\_

Did you graduate? \_\_\_\_\_ When? \_\_\_\_\_ Degree: \_\_\_\_\_

**REFERENCES**

Full Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Full Name: \_\_\_\_\_ Years Known: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_



**PREVIOUS EMPLOYMENT**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_ Salary: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact your supervisor for a reference? Yes \_\_\_ No \_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_ Salary: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact your supervisor for a reference? Yes \_\_\_ No \_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_

Job Title: \_\_\_\_\_ From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_ Salary: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact your supervisor for a reference? Yes \_\_\_ No \_\_\_

**MILITARY SERVICE**

Branch: \_\_\_\_\_ From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

**VERIFICATION**

*I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**CONFIDENTIAL**

**Background Check Authorization**

Print Name: \_\_\_\_\_  
(First) (Middle) (Last)

Former Name(s) and Dates Used: \_\_\_\_\_

Current Address Since: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Previous Address From: \_\_\_\_\_  
(Mo/Yr) (Street) (City) (Zip/State)

Social Security Number: \_\_\_\_\_ DOB: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Drivers License Number/State: \_\_\_\_\_

The information contained in this application is correct to the best of my knowledge.

I hereby authorize \_\_\_\_\_ and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to \_\_\_\_\_ or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources. \_\_\_\_\_ and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security numbers, and dates of birth.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Notice to California, Minnesota and Oklahoma Residents:**  
Please check the box below if you wish to receive a copy of a consumer report that is requested.  
 I wish to receive a copy of any Background Check Report on me that is requested.