**Name** **Social Security #:**

 Last First Middle **Are you a U.S. Citizen?**

**Present Address**

 Street City State Zip Code

**Phone Number(s):**  **Salary Desired:**

**Position applying for:** **Date you can start:**

**Are you over 18 yrs. old?**  Yes  No **If no, provide Date of Birth:** Mo. Day Yr.

**Are you employed now?**  Yes  No **If yes, company & location:**

**May we inquire with your present employer?**  Yes  No **Contact Name & Phone #**

**FORMER EMPLOYERS (LIST LAST 3 EMPLOYERS, STARTING WITH MOST RECENT)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Dates Worked | Employment Information | Salary History | Position Held & Supervisor Name | **Reason For Leaving** |
| From:  To:   | Company Phone Address   | Beginning:  Ending:   |     |     |
| From:  To:   | Company Phone Address   | Beginning:  Ending:   |     |     |
| From:  To:   | Company Phone Address   | Beginning:  Ending:   |     |     |

**High School Name/Location** **No. of Yrs**. **Earn Diploma/GED?**  Yes  No

**College Name/Location** **No. of Yrs**. **Earn Degree?**  Yes  No

**Have you ever been convicted of a crime other than a traffic violation?**  Yes  No

**Do you have any physical, mental, or medical impairments, which would interfere with your ability to do the job for which you are applying?**  Yes  No

I understand than any employment obtained with Apple House Carpentry shall be at such wages, hours, and conditions, which AHC may determine and change from time to time. Such employment shall be for no definite term and can be terminated by AHC or me at any time, with or without cause, and with or without notice, regardless of the date or period of payment of wages or salary. I hereby authorize AHC to investigate my past employment, activities, and statements contained in this application and release from all liability and responsibility all persons, companies. or corporations supply such information. I understand that such information may include a record or disciplinary action assessed by previous employers, and hereby release such parties from any obligation to provide me with written notification of such disclosures.

**Signature**:  **Date:**