## APPLICATION FOR EMPLOYMENT PRE-EMPLOYMENT QUESTIONNAIRE

**EQUAL OPPORTUNITY EMPLOYER** 

PERSONAL INFO				DATE			
NAME (LAST NAME FIRST)		SOCIAL SECURITY NO.					
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PRESENT ADDRESS		CITY		STATE		ZIP CODE	
PERMANENT ADDRESS		CITY		STATE		ZIP CODE	
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ARE YOU EMPLOYED? YES NO		OF YOUR PRESENT EMPLO		LOYER? YES		NO	
EVER APPLIED TO		WHERE?	7		WHEN?		
THIS COMPANY BEFORE?	YES	OV					
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WORK OR SPECIAL TRAIN	NG/SKILLS						
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U.S. MILITARY OR NAVAL SERVICE			RAI	VK			
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DATE DATE							
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Adams 9668 **APR 1998** 

APPLICATION FOR EMPLOYMENT

CONTINUED ON OTHER SIDE

## REFERENCES

NAME	ADDRESS	BUSINESS	YEARS KNOWN
	TAS .		102739

## 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 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 the foregoing, unless it is in writing and signed by an authorized company representative."

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HIRED	FOR DEPT.	POSITION	WILL REPORT	SALARY WAGES	

This application for employment is sold only for general use throughout the United States. Adams assumes no responsibility and hereby disclaims any liability for the inclusion in this form of any questions or requests for information upon which a violation of local, state and/or federal law may be based. It is the user's responsibility to ensure that this form's use complies with applicable laws, which change from time to time.

DEPARTMENT HEAD

GENERAL MANAGER

EMPLOYMENT MANAGER