

TTC APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION:

DATE: _____

NAME:

 LAST FIRST MIDDLE

PRESENT ADDRESS:

 STREET CITY STATE ZIP

PERMANENT ADDRESS:

 STREET CITY STATE ZIP

PHONE NUMBERS:

_____/_____

SS#: _____

DATE OF BIRTH:

 MM/DD/YYYY

STATE NAME AND RELATIONSHIP OF ANY RELATIVES WORKING IN OUR COMPANY:

REFERRED BY: _____	Have you ever been convicted of a Felony	YES	NO

EMPLOYMENT DESIRED: POSITION _____ DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU CURRENTLY EMPLOYED? _____

MAY WE CONTACT YOUR EMPLOYER? _____

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? YES ___ NO ___

WHERE? _____ WHEN? _____

EDUCATION:

SCHOOL	NAME AND LOCATION	GRADUATED		MAJOR SUBJECTS	GPA
		YES	NO		
HIGH SCHOOL	_____				

COLLEGE	_____				

OTHER (SPECIFY)	_____				

LANGUAGE SKILLS: Specify languages you speak:- _____

SPECIAL TRAINING: _____

ACTIVITIES: (CIVIC, ATHLETIC, ETC.) _____

(EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, CREED, SEX, MARITAL STATUS, AGE, COLOR, OR NATIONAL ORIGIN)

FORMER EMPLOYERS: LIST YOUR LAST SIX EMPLOYERS, STARTING WITH PRESENT OR MOST RECENT

NAME AND ADDRESS OF EMPLOYER	DATE	SALARY	POSITION	REASON FOR LEAVING
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		MONTH AND YEAR		
1.	FROM	/ /	\$	
	TO	/ /	Per Hour	
2.	FROM	/ /	\$	
	TO	/ /	Per Hour	
3.	FROM	/ /	\$	
	TO	/ /	Per Hour	
4.	FROM	/ /	\$	
	TO	/ /	Per Hour	
5.	FROM	/ /	\$	
	TO	/ /	Per Hour	
6.	FROM	/ /	\$	
	TO	/ /	Per Hour	

REFERENCES: GIVE THE NAMES OF TWO PAST EMPLOYERS.

NAME.	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			

IN CASE OF EMERGENCY, NOTIFY: _____

NAME

RELATION

ADDRESS: _____

PHONE: () _____

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISALL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PREVIOUS NOTICE.

SIGNED: _____

DATE: _____

APPLICANT - DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: _____

DATE: _____

REMARKS: _____

NEATNESS: _____

ABILITY: _____

HIRED: _____

DEPT.: _____

POSITION: _____

START DATE: _____

SALARY: _____

APPROVALS:

1. _____

2. _____