

APPLICATION FOR EMPLOYMENT
(PRE-EMPLOYMENT QUESTIONNAIRE)

DATE _____

NAME _____
LAST FIRST MIDDLE

PRESENT ADDRESS _____
STREET CITY ZIP

SOCIAL SECURITY NO _____ TELEPHONE NO _____

CAN YOU LEGALLY WORK IN THE UNITED STATES? YES NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

EMPLOYMENT DESIRED:

POSITION _____ DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU EMPLOYED NOW? _____ IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? _____

EVER APPLIED TO WOJO'S BEFORE? _____ IF SO, WHEN? _____

ARE YOU APPLYING FOR: FULL TIME PART TIME SEASONAL

WHICH LOCATION WOULD YOU PREFER TO WORK AT? DAVISON ORTONVILLE EITHER

WHAT DAYS AND HOURS ARE YOU AVAILABLE TO WORK?
(Most weekends are required for most positions)

MON TUE WED THU FRI SAT SUN

REFERRED BY _____

EDUCATION	NAME/LOCATION OF SCHOOL	*NO OF YRS ATTENDED	*DID YOU GRADUATE	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS, CORRESPONDENCE SCHOOL				

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK _____

SPECIAL SKILLS _____

ACTIVITIES (CIVIC, ATHLETIC, ETC.) _____

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS

U.S. MILITARY OR PRESENT MEMBERSHIP IN
NAVAL SERVICE _____ RANK _____ NATIONAL GUARD OR RESERVES _____

*THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1987 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE WITH RESPECT TO INDIVIDUALS WHO ARE AT LEAST 40 YEARS OF AGE. AN EQUAL OPPORTUNITY EMPLOYER

FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST):

DATE MONTH & YEAR	NAME OF EMPLOYER	ADDRESS OF EMPLOYER	EMPLOYER PHONE #	SALARY	POSITION
FROM TO					
REASON FOR LEAVING					
FROM TO					
REASON FOR LEAVING					
FROM TO					
REASON FOR LEAVING					
FROM TO					
REASON FOR LEAVING					

WHICH OF THESE JOBS DID YOU LIKE BEST? _____

WHAT DID YOU LIKE ABOUT THIS JOB? _____

REFERENCES: GIVE THE NAMES OF THREE PEOPLE NOT RELATED TO YOU

NAME	ADDRESS	PHONE #	BUSINESS	YEARS ACQUAINTED

IN CASE OF EMERGENCY, NOTIFY _____
NAME ADDRESS PHONE NO

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND I 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 LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU. I UNDERSTAND AGREE THAT, IF HIRED, 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 PRIOR NOTICE AND WITHOUT CAUSE.

DATE SIGNATURE