



Application for Employment

P R E S E N T A T I O N A L E N T E R P R I S E S	Last Name			First Name			Middle Initial			Date				
	Street Address						Home Telephone ()							
	City, State, Zip						Business Telephone ()							
	Have you ever applied for employment with us? _____ Yes _____ No						Social Security #							
	If Yes: Month and Year _____ Location _____						Position Desired							
	Apart from absence for religious observance, are you available to work full-time? _____ Yes _____ No if not what hours can you work?						Salary Desired							
	Are you legally eligible for employment in the United States?						Are you willing to work Overtime? _____ Yes _____							
	Other special training or skill (languages, machine operations, etc...)						No							
	E d u c a t i o n						How did you hear about this position?							
							When can you begin?							
	School		Name and Location of School		Course of Study		No of Years Completed		Graduate		Diploma/Degree		GPA Average	
	Graduate													
	College													
	Business/Trade/Technical													
High School														
Elementary														

Provide dates you attended school			
High School	From:	To:	College
			From:
			To:

Did you serve in the U.S. Armed Forces?	If "yes" what Branch?	Are you a Vietnam era veteran?
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Describe any training received relevant to the position for which you are applying.

EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employment.

1.	Company Name	Telephone #
	Full Address & Zip	Employed From: To:
	Name of Supervisor	Weekly Pay/Annual Salary
	Job Title/Describe Your Work	Reason for Leaving

2.	Company Name	Telephone #
	Full Address & Zip	Employed From: To:
	Name of Supervisor	Weekly Pay/Annual Salary
	Job Title/Describe Your Work	Reason for Leaving

3.	Company Name	Telephone #
	Full Address & Zip	Employed From: To:
	Name of Supervisor	Weekly Pay/Annual Salary
	Job Title/Describe Your Work	Reason for Leaving

4.	Company Name	Telephone #
	Full Address & Zip	Employed From: To:
	Name of Supervisor	Weekly Pay/Annual Salary
	Job Title/Describe Your Work	Reason for Leaving

5.	Company Name	Telephone #
	Full Address & Zip	Employed From: To:
	Name of Supervisor	Weekly Pay/Annual Salary
	Job Title/Describe Your Work	Reason for Leaving

<i>We may contact the employers above unless, you indicate those you do not want us to contact.</i>	DO NOT CONTACT
	Employer Number
	Reason:
	DO NOT CONTACT
Employer Number	Employer Number
Reason:	Reason:



For Employer's Use Only

	Interviewer Name and Comments:

Notes:

**CARDINALE
ENTERPRISES**

	Employer	Person Contacted	Results

- I reviewed typical work day and work week routines.
- I reviewed Company Employment Contract.
- I reviewed that we will contact (3) past personal references, & (3) past employers as Verification of employment.