



**APPLICATION FOR EMPLOYMENT
PRE-EMPLOYMENT QUESTIONNAIRE
EQUAL OPPORTUNITY EMPLOYER**

Personal Information

NAME (LAST NAME FIRST): _____ DATE _____
 SOCIAL SECURITY NO. _____ PHONE NO. _____
 PRESENT ADDRESS _____
 CITY _____ STATE _____ ZIP CODE _____
 PERMANENT ADDRESS _____
 CITY _____ STATE _____ ZIP CODE _____
 REFERRED BY _____ HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO
 IF SO, DESCRIBE _____

Education History

HIGHEST LEVEL OF EDUCATION COMPLETED
 NAME & LOCATION OF SCHOOL YEARS ATTENDED DID YOU GRADUATE? SUBJECTS STUDIED

Employment Desired

POSITION _____ DATE YOU CAN START _____

AVAILABILITY TO WORK

Availability	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Starting Time							
Ending Time							

SALARY DESIRED _____ ARE YOU EMPLOYED? YES NO

IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? YES NO

EVER WORKED AT GRINDERS ABOVE & BEYOND BEFORE? YES NO

IF SO, WHICH LOCATION? _____ WHEN? _____

General Information

SUBJECTS OF SPECIAL STUDY/RESEARCH WORK OR SPECIAL TRAINING/SKILLS

US MILITARY OR NAVAL SERVICE AND RANKS

Former Employers (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)

NAME & ADDRESS OF EMPLOYER _____

PHONE NUMBER _____ STARTING & ENDING DATES MONTH & YEAR _____

SALARY _____ POSITION _____ REASON FOR LEAVING _____

NAME & ADDRESS OF EMPLOYER _____

PHONE NUMBER _____ STARTING & ENDING DATES MONTH & YEAR _____

SALARY _____ POSITION _____ REASON FOR LEAVING _____

NAME & ADDRESS OF EMPLOYER _____

PHONE NUMBER _____ STARTING & ENDING DATES MONTH & YEAR _____

SALARY _____ POSITION _____ REASON FOR LEAVING _____

References (GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR)

NAME	ADDRESS	BUSINESS	YEARS KNOWN
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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 references and employers listed above to give you 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 damages 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 and 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. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.”

EMPLOYMENT AT WILL – Employees of Grinders Above & Beyond are at-will employees, and employment may be terminated at any time, and for any or no reason, by the Company. No representative of the Company has the authority to enter into any agreement for employment for any specific time or to make any agreement contrary to established Company policies or practices, unless it is in writing and signed by the President of the Company.

DATE _____ SIGNATURE _____

(FOR MANAGEMENT USE ONLY)

Remarks

NEATNESS	CHARACTER	PERSONALITY	HIRED	POSITION	SALARY /WAGES
_____	_____	_____	_____	_____	_____