

EDUCATION

Name, Address and Location	Dates	Graduate?	Courses Studied
High School		Yes <input type="checkbox"/> No <input type="checkbox"/>	Diploma:
College	From: To:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Diploma:
Trade School	From: To:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Diploma:

If you did not graduate, why did you leave high school or college? _____

Are you planning to pursue further studies?

Yes No If so, when, where and what courses? _____

List any scholastic honors, offices held and activities involved in during high school and college _____

List and describe any other School or Specialized Training _____

MILITARY

Have you ever served in the military? Yes No

Service Branch _____ Date Entered _____

Date Separated _____ Final Rank _____

CAPABILITY / RELIABILITY

Would you be willing and able to perform all of the tasks required by the job you are applying for? Yes No

If not, please explain which tasks _____

Have you filed any type of fraudulent claim against any of your present or past employers? Yes No

If yes, please explain _____

Will you abide by the safety rules of ABC Laboratories? Yes No

Have you ever been disciplined for violating safety rules or regulations? Yes No

If yes, please explain _____

How many days of work (or school) have you missed in the last two years? _____

How many times have you been late for work (or school) in the last two years? _____

Would you be willing and able to report to work on time every day on a regular and consistent basis? Yes No

If no, please explain _____

WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

PLEASE GIVE MONTH AND YEAR.

DO NOT REFERENCE YOUR RESUME.

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From: Mo. _____ Yr. _____	To: Mo. _____ Yr. _____	Starting \$ Ending \$ _____
Telephone Area Code ()	Nature of Business				
Title Duties		Reason for Leaving			

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From: Mo. _____ Yr. _____	To: Mo. _____ Yr. _____	Starting \$ Ending \$ _____
Telephone Area Code ()	Nature of Business				
Title Duties		Reason for Leaving			

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
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Telephone Area Code ()	Nature of Business				
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Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From: Mo. _____	To: Mo. _____	Starting \$ _____
Telephone Area Code ()	Nature of Business		Yr. _____	Yr. _____	Ending \$ _____
Title		Reason for Leaving			
Duties					

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From: Mo. _____	To: Mo. _____	Starting \$ _____
Telephone Area Code ()	Nature of Business		Yr. _____	Yr. _____	Ending \$ _____
Title		Reason for Leaving			
Duties					

Name of Employer Address City, State, Zip Code		Name and Title of Last Supervisor	Dates Employed		Pay
			From: Mo. _____	To: Mo. _____	Starting \$ _____
Telephone Area Code ()	Nature of Business		Yr. _____	Yr. _____	Ending \$ _____
Title		Reason for Leaving			
Duties					

SUPPLEMENTAL EMPLOYMENT INFORMATION

If you worked in any of your previous positions under another name, please give that name(s) below: (For reference checking purposes)

Name _____ @ Company _____
 Name _____ @ Company _____

Are you presently employed? Yes No

If yes, may we contact your present employer? Yes No

Have you ever been fired, or asked to resign, from a job? Yes No

If yes, please explain? _____

Have you ever been disciplined or received verbal or written warnings for absenteeism or tardiness? Yes No

If yes, please explain? _____

SPECIAL SKILLS

Have you had any computer or word processing experience or training? Yes No

If yes, please describe? _____

What languages do you speak fluently? _____

Use this space below to describe why you are interested in working for ABC Laboratories and to list those skills and abilities which you feel particularly qualify you for a position with us. If you need more space, please continue on a separate sheet.

REFERENCES

Give three references, not relatives or former employees.

Name	Address	Phone	Occupation

AFFIDAVIT

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect made on this application form or during any interviews may be grounds for my immediate discharge.

I hereby authorize ABC Laboratories to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive the right to bring any cause of action against these individuals for defamation, invasion of privacy or any reason because of their statements.

I agree that, I am employed, I will abide by all the rules and regulations of ABC Laboratories. I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody in ABC Laboratories is authorized to enter into any written or verbal employment contracts with me for any definite period of time without the express written consent of the President of ABC Laboratories. I also understand that my employment is "**at-will**" and may be terminated by myself or by the company at any time for any reason or nor reason at all, with or without prior notice.

Signature _____ Date ____ / ____ / ____