Application for Employment (Pre-employment Questionnaire) (An Equal Opportunity Employer)

Personal Information				
		]	<b>Date:</b>	
Name:				
LAST	FIRST		MIDDLE	
Present Address:				
Street		City	State	Zip
Permanent Address:				
Street		City	State	Zip
Phone No.	Ar	e you 18 year	s or older? Yes	_ No
Are you prevented from lawfully by visa or immigration status? Yes EMPLOYMENT DESIRED				
Position	Date can	start	Salary desired	
Are you employed now?	If so may	we inquire pr	esent employer?	
Ever applied to this company before	?	Where?	When?	
Deferred by				
Referred by EDUCATION Name & Location of	f School	yrs attended	Did you graduate	Subjects
Grammar School				
High School				
College				
Trade/Business or Other GENERAL	•••••		•••••	
Subjects of special study or research	work:			
Special Skills				
Activities (Civic, Athletic etc)				

US Military or Naval Service Rank			
Former Employers (List below last three employers, standard Month and year Name & Address of Employer  Fromto	Salary	Position Reason	
Fromto			
Fromto			
Which of these jobs did you like best?			
What did you like most about this job?			
References: name three people, unrelated to you, whom Name Address Business			1 year. Phone
1			
2			
3			
In case of emergency notify:			
Name Addre	ess	Phone	
**I certify that all the information submitted by me on the complete, and I understand that if any false information, are discovered, my application may be rejected and if I amay be terminated at any time.  In consideration of my employment, I agree to conform regulations and I agree that my employment and compensive without cause, and with or without notice, at any time, at option. I also understand and agree that the terms and cobe changed, with or without cause and with or without not company. I understand that no company representative, only when in writing and signed by the President, has any agreement for employment for any specific period of time contrary to the foregoing.	to the comsation can whether moditions of otice at any authority	or misrepresed, my employed, my employed pany's rules be terminated by or the company or the company time by the its president, to enter into	entations yment  and I, with or pany's nent may and then any
Date: Signature:			

## Do Not write on this page... For employer only

Interviewed B	У			Date:
Remarks:				
Neatness			_ Ability	
Hired Yes	No	Position		Dept
Salary/Wage _		Date r	eporting to work _	
Approved: 1.	P. 1			3.
	Employment manage	er	Dept. Head	General Manager

This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination. This application for employment form is sold for general use throughout the United States. TOPS assumes no responsibility for the inclusion in said form of any questions which, when asked by the Employer of the Job applicant, may violate State and/or Federal Law.

1/2010