

# LOVERN'S INC.

## APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE  
EQUAL OPPORTUNITY EMPLOYER

### PERSONAL INFORMATION

NAME (LAST NAME FIRST):		SOCIAL SECURITY NO:	
PRESENT ADDRESS:	CITY:	STATE:	ZIP CODE:
PHONE NO:	REFERRED BY:		

### EMPLOYMENT DESIRED

POSITION:	DATE AVAILABLE:	SALARY DESIRED:
ARE YOU PRESENTLY EMPLOYED? YES <input type="checkbox"/>	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/>	
NO <input type="checkbox"/>		
EVER APPLIED TO THIS COMPANY BEFORE? YES <input type="checkbox"/> NO <input type="checkbox"/>	WHERE?	WHEN?

NAME AND LOCATION OF SCHOOL:	YEARS ATTENDED:	DID YOU GRADUATE:	SUBJECTS STUDIED:
GRAMMER SCHOOL			
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL			

### GENERAL

SUBJECTS OF SPECIAL STUDY/RESEARCH WORK OR SPECIAL TRAINING /SKILLS:	
U.S. MILITARY OR NAVAL SERVICE:	RANK:

### REFERENCES (GIVE THE NAME OF THREE PERSONS NOT RELATED TO YOU WHOM YOU HAVE KNOWN ATLEAST ONE YEAR)

NAME/CONTACT NO.	ADDRESS	BUSINESS	YEARS KNOWN
1.			
2.			
3.			

(CONTINUED ON OTHER SIDE)

**FORMER EMPLOYERS**

**(LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH THE LAST ONE FIRST)**

<b>DATE MONTH AND YEAR</b>	<b>NAME AND ADDRESS OF EMPLOYER</b>	<b>SALARY</b>	<b>POSITION</b>	<b>REASON FOR LEAVING</b>
<b>FROM:</b>				
<b>TO:</b>				
<b>FROM:</b>				
<b>TO:</b>				
<b>FROM:</b>				
<b>TO:</b>				

**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 THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT, AND ANY PERTINENT INFORMATION THAT MAY HAVE PERSONAL, OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE 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 ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE."

**DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

*DO NOT WRITE BELOW THIS LINE*

**REMARKS**

<b>NEATNESS</b>		<b>CHARACTER</b>		
<b>PERSONALITY</b>		<b>ABILITY</b>		
<b>HIRED:</b>	<b>DEPARTMENT:</b>	<b>POSITION/TITLE:</b>	<b>WILL REPORT TO:</b>	<b>SALARY/WAGES:</b>

**INTERVIEWED BY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_



## NEW APPLICANT QUESTIONNAIRE

LAST NAME	FIRST NAME	MI

(NOTE – above name MUST match name on Social Security card)

ANY STATE OR FEDERAL CONVICTIONS	IF YES, SPECIFY

ANY PREVIOUS WORKMANS COMP CLAIMS?	IF YES, SPECIFY	CLAIM TYPE	EXTENT OF CLAIM	CLAIM#

VALID DRIVERS LICENSE	STATE	EXPIRATION DATE	CLASS	DRIVING RECORD?

**DO YOU HAVE RELIABLE TRANSPORTATION TO TRANSPORT TO AND FROM EACH JOB SITE?**

DO YOU SPEAK ANY FOREIGN LANGUAGES FLUENTLY?	LANGUAGE	ADDITIONAL INFORMATION

**CITIZENSHIP STATUS;**

- Citizen of the United States
- Lawful Permanent Resident
- Alien authorized to work in the United States

Permit No: \_\_\_\_\_

\_\_\_\_\_  
I certify that all information contained herein, is true and correct to the best of my knowledge and belief;

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE