

SWAGLER'S ALLCLEASE LLC
Employment Application



Last Name: _____
First Name: _____
M.I. _____

APPLICANT INFORMATION										
Last Name				First			M.I.	Date		
Street Address						Apartment/Unit #				
City				State			ZIP			
Phone				E-mail Address						
Date Available			Social Security No.				Desired Salary			
Position Applied for										
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>					
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?							
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain							

EDUCATION							
High School				Address			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College				Address			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other				Address			
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES				
<i>Please list three personal or professional references.</i>				
Full Name			Relationship	
Company			Phone	()
Address				
Full Name			Relationship	
Company			Phone	()
Address				
Full Name			Relationship	
Company			Phone	()
Address				

*** Do you have any chemical or pet allergies? YES NO If YES, please list: _____

NOTE: Please fill out other side completely.

PREVIOUS EMPLOYMENT

Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company					Phone	()	
Address					Supervisor		
Job Title				Starting Salary	\$	Ending Salary	\$
Responsibilities							
From		To		Reason for Leaving			
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		

MILITARY SERVICE

Branch				From		To	
Rank at Discharge					Type of Discharge		
If other than honorable, explain							

AWARDS, SKILLS, & ACCOMPLISHMENTS

Awards Earned:							
Personal Accomplishments:							
Special Skills:							

DISCLAIMER AND SIGNATURE

<p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p>							
Signature				Date			