



## Employment Application

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Position applying for: \_\_\_\_\_

Type of position applying for:      Full Time      Part-time      Intern / Temp

When are you available to work? \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

List below all places of residence within the past 10 years:

<u>Dates</u>	<u>Number/Street</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>County</u>
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Do you have friends or family that work here?                      YES                      NO

Do you possess a valid State of Ohio Driver's License?                      YES                      NO

Have you ever been convicted of a crime, including misdemeanors and traffic violations?

YES                      NO

If yes describe in full: \_\_\_\_\_

\_\_\_\_\_

## Education

	High School	College / University	Graduate / Professional
School Name / Address	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Highest Year Completed	9 10 11 12	1 2 3 4	1 2 3 4
Year of Completion			
Diploma / Degree	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Course of Study	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
Specialized Training, Apprenticeship, Skills and Extra Curricular Activities	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Honors Received: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Military Service Record

Are you a veteran of the U.S. Military Service? \_\_\_\_\_

If yes, what branch? \_\_\_\_\_

Dates of Duty: From \_\_\_\_\_ To \_\_\_\_\_

Rank at discharge: \_\_\_\_\_

Type of discharge: \_\_\_\_\_

List of service duties including special training: \_\_\_\_\_

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**(Attach copy of DD214 Discharge papers)**

## Personal References

Name & Occupation	Address	Phone Number

Any additional information you feel would be useful: \_\_\_\_\_

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# Employment Experience

		Dates: From / To	Work Preformed
Employer			
Address		Starting Wages	Final Wages
Job Title			
Supervisor		Phone	
Reason for Leaving			
		Dates: From / To	Work Preformed
Employer			
Address		Starting Wages	Final Wages
Job Title			
Supervisor		Phone	
Reason for Leaving			
		Dates: From / To	Work Preformed
Employer			
Address		Starting Wages	Final Wages
Job Title			
Supervisor		Phone	
Reason for Leaving			

# Agreement

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview/s may result in discharge. I understand, also, that I am required to abide by all rules and regulations of Mossor Computers Inc.

I understand this application will remain on file for one year and will not be considered for a currently advertised opening unless I contact Mossor Computers Inc and request that it be considered.

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_