

New Dawn Enterprises

Application for Employment

Today's Date: _____

APPLICANT INFORMATION

Last Name		First Name	M.I.
Address (street or PO Box)			Apt/Lot #
City		State	ZIP
Phone Home #	Cell #	e-mail	
Position Applying for			
Are you authorized to work in the U.S.?		Yes ___	No ___
Have you ever worked for this company?		Yes ___	No ___ if so, when?
Are You Over the Age of 18?		Yes ___	No ___

EDUCATION/TRAINING/SKILLS

Do you possess a high school diploma or GED?		Yes ___	No ___
School Name/Address/City/State			
Post-Secondary School Name/Address/City/State			
Did You Graduate?		Yes ___	No ___
		Degree	
Do you possess a valid drivers licenses?		Yes ___	No ___
		From which state?	
List all relevant licenses, certifications, or registrations. Also identify other educational experiences relevant to the position you are applying for.			

REFERNCES

Please list three personal references

Full Name		Relationship
Address		Phone
Full Name		Relationship
Address		Phone
Full Name		Relationship
Address		Phone

PREVIOUS EMPLOYMENT

Company			Phone
Address		Supervisor	
Job Title	From:	To:	Reason for leaving:
Skills learned/used:			
May we contact your previous supervisor for a reference? Yes ___ No ___			

Company			Phone
Address		Supervisor	
Job Title	From:	To:	Reason for leaving:
Skills learned/used:			
May we contact your previous supervisor for a reference? Yes ___ No ___			

Company			Phone
Address		Supervisor	
Job Title	From:	To:	Reason for leaving:
Skills learned/used:			
May we contact your previous supervisor for a reference? Yes ___ No ___			

MILITARY SERVICE

Branch	From:	To:	
Did you serve on active duty? Yes ___ No ___	Type of discharge:		

DISCLAIMER AND SIGNATURE

I certify that the information on this application and its supporting documents is accurate and complete. I understand, and agree that failure to complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize the employer to investigate and verify all statements contained in this application and supporting materials.

Signature _____

Date: _____