



ONLINE APPLICATION

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For:	Today's Date
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How Did You Learn About Us?

<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
1. Newspaper ()	Name _____	
2. Radio ()		<input type="checkbox"/> Internet
3. Yellow Pages ()	<input type="checkbox"/> Relative	
<input type="checkbox"/> Employment Agency	Name _____	<input type="checkbox"/> Other _____

Last Name	First Name	Middle Name	Maiden Name
Address:		City	State Zip Code
Telephone Number(s)		Email	Social Security Number

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No If Yes, please give date _____

Have you ever been employed with us before? Yes No If Yes, please give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Do you speak a language other than English? If so, which? _____ Fluently? _____

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No
Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Perm Only Temporary ☆☆☆☆ Days Nights

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you ever been convicted of a felony? Yes No
Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Need ONE ID Need BOTH ID

Employment Experience

Start with your **PRESENT** or **LAST job**. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer Name	Dates Employed	Work Performed
Address	<u>From</u> <u>To</u>	
City State Zip		
Telephone Number(s)	Hourly Rate/Salary	
	<u>Starting</u> <u>Final</u>	
Job Title Supervisor		
Reason for Leaving		
Employer Name	Dates Employed	Work Performed
Address	<u>From</u> <u>To</u>	
City State Zip		
Telephone Number(s)	Hourly Rate/Salary	
	<u>Starting</u> <u>Final</u>	
Job Title Supervisor		
Reason for Leaving		
Employer Name	Dates Employed	Work Performed
Address	<u>From</u> <u>To</u>	
City State Zip		
Telephone Number(s)	Hourly Rate/Salary	
	<u>Starting</u> <u>Final</u>	
Job Title Supervisor		
Reason for Leaving		

Education

	Name and Address of School	Course of Study	Years Completed	Diploma/ Degree (Yes or No)
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

References - Please list two business references below.

1.
(Name) (Phone #)
(Address) (City) (State) (Zip)
2.
(Name) (Phone #)
(Address) (City) (State) (Zip)

Describe any specialized training, apprenticeship, skills, and extra-curricular activities.

Describe any job-related training received in the United States military.

Pro*Temps Applicant's Statement

I certify that 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.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should let Pro*Temps know when they are finished completing this application.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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 the Employer.

Signature of Applicant

Date

OFFICE EXPERIENCE AND EQUIPMENT USED:

(Circle the word which best describes your experience and skills)

BOOKKEEPING

My bookkeeping experience is: (Circle One) Manual – Computer
(Circle One) Basic Bookkeeping – Full Charge Book Bookkeeping

Accounts Receivable/Payable: Excellent – Good – Fair – Very Little – None

Payroll: Excellent – Good – Fair – Very Little – None

Taxes: Excellent – Good – Fair – Very Little – None

Balance Sheet & Financials: Excellent – Good – Fair – Very Little – None

OFFICE EQUIPMENT

Typing: Excellent – Good – Fair – Very Little – None
Estimated Speed? _____

Dictaphone: Excellent – Good – Fair – Very Little – None

Calculator: Excellent – Good – Fair – Very Little – None

Cash Register: Excellent – Good – Fair – Very Little – None

Data Entry: Excellent – Good – Fair – Very Little – None

Switchboard: Excellent – Good – Fair – Very Little – None

WORD PROCESSING & COMPUTER PROGRAMS USED

Please list the word processing and computer software used.

Do you have experience with Window's software? _____

Additional Information? _____

Production or Factory work, equipment used _____

Have you worked on an assembly line? _____ Describe duties: _____