

George Dapper Inc.

APPLICATION FOR EMPLOYMENT

PERSONAL

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

Last Name	First	Middle	Date
Street Address			Home Phone
City, State, Zip			Cell Phone
Have you ever applied for employment with us? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes: Month & Year What Location:			Social Security No.
Position Desired	Full Time Yes <input type="checkbox"/> No <input type="checkbox"/> (If Positions are Available) Part Time Yes <input type="checkbox"/> No <input type="checkbox"/>	Will you work overtime if asked? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Do you have Commercial Driver's License? What Type?			What Endorsements?
Have you had any points on your license in the past 3 years? If so, for what? Has your license ever been suspended? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain?			State names of relatives and friends working for us other than your spouse.
Are you legally eligible for employment in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/>			How did you learn of our organization?
When will you be available/not available to begin work?			Comments

EDUCATION

SCHOOL	NAME & LOCATION OF SCHOOL	COURSE OF STUDY	NO.OF YEARS COMPLETED	DID YOU GRADUATE ?	DEGREE OR DIPLOMA
College				Yes <input type="checkbox"/> No <input type="checkbox"/>	
High				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Elementary				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other				Yes <input type="checkbox"/> No <input type="checkbox"/>	

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS

(Exclude those which may disclose your race, color, religion or national origin)

EMPLOYMENT HISTORY

Company Name	Please give accurate, complete fulltime and part-time employment record. Start with present or most recent employer.
Address	Telephone
Address	Employed (state month & year) From To
Name of Supervisor	Weekly Pay Start Last
State Job Title and Describe Your Work	Reason for Leaving
<hr/>	
Company Name	Telephone
Address	Employed (state month & year) From To
Name of Supervisor	Weekly Pay Start Last
State Job Title and Describe Your Work	Reason for Leaving
<hr/>	
Company Name	Telephone
Address	Employed (state month & year) From To
Name of Supervisor	Weekly Pay Start Last
State Job Title and Describe Your Work	Reason for Leaving

PERSONAL REFERENCES

Name	Telephone
Address	Cell #
Relationship	# of years

Name	Telephone
Address	Cell #
Relationship	# Of years

The information requested is needed for a legally permissible reason, including, without limitation, national security considerations, a legitimate occupational qualification or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of most States also prohibit some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status or physical or mental handicap or disability.

What was your previous address?	Are you a U.S. Citizen? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you over 18 years of age? (circle) Yes <input type="checkbox"/> No <input type="checkbox"/> If not, employment is subject to verification of minimum legal age.	How long at present address? Years
What is your date of birth?	How long at previous address? Years
Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? (circle) Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, describe in full:	
Do you have any physical disabilities that would interfere with your job?	

The information provided in the Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

If you decide to engage an investigative consumer-reporting agency to report on my credit and personal history and my driving record, I authorize you to do so. If a report is obtained you must provide, at my request, the name and address of the agency so I may obtain from them the nature and subject of the information contained in the report.

Signature _____ Date _____