

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: Type or print answers to ALL questions
Please Fax or Email All Applications To : 866-604-4771
or to admin@quantumelectric.net

DATE

SOCIAL SECURITY NUMBER	□	□	□	-	□	□	-	□	□	□
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NAME (Last)	(First)	(MI)	SUFFIX (JR.)
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ADDRESS (Number and Street)

CITY	STATE	ZIP CODE (Last 4 digits are optional)
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AREA CODE	HOME PHONE NUMBER	DAYS/HOURS AVAILABLE TO WORK
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POSITION APPLIED FOR	
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DESIRED HOURLY RATE OF PAY	Drivers License Yes No If you are 17 years old or younger, enter your age
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What kind of position are you applying for? Full time Part time Either	HOW MANY HOURS CAN YOU WORK PER WEEK?
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EDUCATION: Have you graduated from High School or received a High School equivalency diploma? Yes No	If No, circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12
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SCHOOL	NAME	ADDRESS	DATES ATTENDED		CREDIT HOURS COMPLETED	TYPE OF DEGREE RECEIVED	MAJOR COURSE OF STUDY	DID YOU GRADUATE?
			FROM	TO				
HIGH SCHOOL								
TECHNICAL OR BUSINESS								
COLLEGE OR UNIVERSITY								

HAVE YOU EVER BEEN CONVICTED OF A CRIME ? YES NO
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If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence (s) imposed, and type of rehabilitation.

List additional skills, knowledge and abilities you possess:

INSTRUCTIONS

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Official Job title (Start with most recent job)		Company Name			Type of Business	
Title of Immediate Supervisor		Dept. Where Assigned		Business Address/Phone No.		
Employed From: (Mo.)	(Yr.)	To: (Mo.)	(Yr.)	Total (Yrs. Mos.)	Salary or Wage \$	Hours Per Week (Full-time) (Part-time)
				Per		
No. and Titles of Employees Supervised by You				Reason for Leaving		
DUTIES (must be listed)						
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CERTIFICATION: I certify that the statements made by me on this application are true and complete to the best of my knowledge and are made in good faith. I understand that if I knowingly make any misstatement of fact, I am subject to disqualification and dismissal and to such other penalties as may be prescribed by law or personnel regulations. All statements made on this application, including employment information, are subject to verification as a condition of employment.

SIGNED: _____

DATE: _____

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