EDWARD ENTERPRISES, INC. APPLICATION FOR EMPLOYMENT

(An Equal Opportunity Employer)

<u>Please Print</u>	Date:		
	Job or type of work for which you are applying		
GENERAL INFORMATION			
Name:			
Address:			
Are you legally eligible for employment in the United States?	_		
Person to notify in case of emergency:			
Address:	Phone:		
PREVIOUS EMPLOYMENT (List employers you worked for with Name of employer:	thin the past 10 years). Use additional sheets if needed.		
Address:			
Name of immediate supervisor:	Phone:		
Position held and responsibility:			
Date started: Date left:			
Reasons for leaving:			
Name of employer:			
Address:	Type of Business:		
Name of immediate supervisor:	Phone:		
Position held and responsibility:			
Date started: Date left:			
Reasons for leaving:			

PREVIOUS EMPLOYMENT (cont.)

Name of employer:						
			Type of Business:			
Name of immediate su	ipervisor:		Phone:			
Position held and response	onsibility:					
Date started:		Date left:				
Reasons for leaving: _						
REFERENCES List three persons not a habits and ability:		bly residing in H		ontact as to personal and		
Name		Address	Occi	ıpation	Phone	
EDUCATION	Name of School		Location	No. of Years Attended	Diploma/Degree	
Elementary:						
Middle School:						
High School:						
College:						
Other Training:						
				ich are relevant to the job	for which you are	
applying:						

The work attendance schedule requi	ires that an employee be present at all assig	ened shifts. Is there any reason why you would not be
able to be regularly present during t	he assigned hours?NoYes	
If yes, explain:		
Are you willing to work overtime if	required? No Yes	
Do you have relatives working here	or for a competitor? Explain: _	
How did you learn of this opening?		
If your application is considered fav	vorably, on what date will you be available	for work?
false answer or statements or implic		ete to the best of my knowledge. I understand that any er employment-related documents, or in my employment
I release from all liability all perso		my past employment, education, and activities and government agencies that supply such information. sult from making such investigation.
and compensation can be terminated Edward Enterprises, Inc. or myself. president or vice-president of Edwa	d, with or without cause, and with or without I understand that no agent or representative	e of Edward Enterprises, Inc., other than the the terms of my employment and that no change
Date of Application		Signature of Applicant
	This application is current for the	hirty days
Date of Interview:	Position for which considered:	Decision Reached:
Interviewer's Notes:		
		Date applicant notified:
Starting Date:		
Starting Pay:		

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