

SAMPLE JOB APPLICATION

PLEASE NOTE: It is important that you complete all parts of the application. If your application is incomplete or does not clearly show the experience and/or training required, your application may not be accepted. If you have no information to enter in a section, please write N/A.

Name and Address							
Name (First, MI, Last) Macy Leigh Giffin				Social Security Number 999-99-9999			
Mailing Address 999 Elm Street							
City, State, and Zip Code Los Angeles, CA 90001							
Telephone (559) 999-9999				Alternate Phone			
If under 18, please list age 00				Email macygiffin07@gmail.com			
Job Type							
Days/hours available to work							
<input checked="" type="checkbox"/> I have no preference.	<input type="checkbox"/> Mon.	<input type="checkbox"/> Tues.	<input type="checkbox"/> Wed.	<input type="checkbox"/> Thurs.	<input type="checkbox"/> Fri.	<input type="checkbox"/> Sat.	<input type="checkbox"/> Sun.
I am seeking a:		<input type="checkbox"/> Full-time job		<input checked="" type="checkbox"/> Part-time job		<input type="checkbox"/> Full- or Part-time	
How many hours can you work weekly? 20 hours				Can you work nights? No		Date available to begin 6/8/23	
Additional Information							
Have you ever been employed by this organization in the past?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
I certify that I am a U.S. citizen, permanent resident, or a foreign national with authorization to work in the United States.						<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of, or entered a plea of guilty, no contest, or had a withheld judgment to a felony?						<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If Yes, please explain:							
Do you have a driver's license? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Driver's license number n/a		Issued in what state? n/a	
Have you had any accidents during the past three years? n/a						How many? n/a	
Have you had any moving violations during the past three years? n/a						How many? n/a	

Education				
School	Location (mailing address)	Years Completed	Major	Degree or Diploma
High School				
Coalinga High School	750 Van Ness St, Coalinga, CA 93210	2	n/a	n/a
College or Business/Trade School				
West Hills Community College	300 W Cherry Lane, Coalinga, CA 93210	1	Health Science AS	n/a
Military				
Have you even been in the Armed Forces?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Date entered n/a	
Are you now a member of the National Guard?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Discharge date n/a	
Specialty n/a				

Work Experience

Please list ALL work experience beginning with your most recent job held. Attach additional sheets if necessary.

Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone number	Your last job title	

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact this employer? Yes No

Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone number	Your last job title	

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact this employer? Yes No

Work Experience (continued)

Company	Name of last supervisor	Hrs/week
Address	Start Date	Starting Salary
City, State, and Zip Code	End Date	Final Salary
Phone number	Your last job title	

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact this employer? Yes No

References

Please include name, phone number, and circumstances of your acquaintance. Exclude relatives and former employers.

1. Mrs. Jessica Fairbanks 999 Elm Street
 Los Angeles, CA 90001
 Phone: (559) 999-9999

2. Mrs. Emily McFarlin 999 Elm Street
 Los Angeles, CA 90001
 Phone: (559) 999-9999

3. Mr. William Pinney 999 Elm Street
 Los Angeles, CA 90001
 Phone: (559) 999-9999

4.

I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that, should this application contain any false or misleading information, my application may be rejected or my employment with this company terminated.

Signature


Date
 5/2/23