

# Patriot Pottys, LLC

## APPLICATION FOR EMPLOYMENT

Date \_\_\_\_\_

PROSPECTIVE EMPLOYEES WILL RECEIVE CONSIDERATION WITHOUT DISCRIMINATION BECAUSE OF RACE, CREED, COLOR, SEX, AGE, NATIONAL ORIGIN, HANDICAP OR VETERAN STATUS.

### PERSONAL INFORMATION

LAST NAME	FIRST	MIDDLE	DOB
STREET ADDRESS			HOME PHONE
			(    )    -
CITY	STATE	ZIPCODE	BUSINESS PHONE
			(    )    -
ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.?			SOCIAL SECURITY #
			-   -
POSITION DESIRED			PAY EXPECTED
APART FROM ABSENCE FOR RELIGIOUS OBSERVATION, ARE YOU AVAILABLE FOR FULL-TIME WORK?			WILL YOU WORK OVER-TIME IF ASKED?
<input type="checkbox"/> YES <input type="checkbox"/> NO   IF NO, WHAT HOURS CAN YOU WORK? _____			<input type="checkbox"/> YES <input type="checkbox"/> NO
OTHER SPECIAL TRAINING OR SKILLS (LANGUAGES, MACHINE OPERATION, ETC.)			WHEN ARE YOU AVAILABLE TO BEGIN WORK?

### EDUCATION

SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	# OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
COLLEGE				<input type="checkbox"/> YES <input type="checkbox"/> NO	
HIGH SCHOOL				<input type="checkbox"/> YES <input type="checkbox"/> NO	
OTHER				<input type="checkbox"/> YES <input type="checkbox"/> NO	

## EMPLOYMENT

PLEASE GIVE ACCURATE, COMPLETE FULL & PART-TIME EMPLOYMENT RECORD. START WITH PRESENT OR MOST RECENT.

COMPANY NAME	TELEPHONE
ADDRESS	EMPLOYED (MONTH & YEAR) FROM _____ TO _____
NAME OF SUPERVISOR	WEEKLY PAY START _____ LAST _____
JOB TITLE & DESCRIPTION OF DUTIES	REASON FOR LEAVING

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ADDRESS	EMPLOYED (MONTH & YEAR) FROM _____ TO _____
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ADDRESS	EMPLOYED (MONTH & YEAR) FROM _____ TO _____
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WE MAY CONTACT THE EMPLOYERS LISTED ABOVE UNLESS YOU INDICATE THOSE YOU DO NOT WANT US TO CONTACT.