

# ABC SEAMLESS OF NE OKLAHOMA

## Employment Application

Do not leave any spaces blank. Type or print in black or blue ink.



APPLICANT INFORMATION									
Last Name		First			Middle		Date		
Street Address									
City			State		Zip				
Phone			E-mail Address						
Other or former names (maiden/married names)			Social Security No.			Date of Birth			
Position Applied for		Date available			Do you have dependable transportation?				
Are you legally qualified to work in the United States?		YES		NO					
Have you ever been convicted of a misdemeanor which resulted in imprisonment?		YES		NO		If yes, explain			
Have you ever been convicted of a felony? <small>A yes answer does not necessarily disqualify an applicant from employment.</small>		YES		NO		If yes, explain			
Driver's License No.		State			Expiration Date				

EDUCATION									
High School				Address					
Did you graduate?				YES		NO		Field of Study	
College				Address					
Did you graduate?				YES		NO		Degree	

REFERENCES			
<i>Please list three professional references. (NO FRIENDS OR FAMILY MEMBERS)</i>			
Full Name		Relationship (boss, manager, etc.)	
Company		Phone	
Address			
Full Name		Relationship (boss, manager, etc.)	
Company		Phone	
Address			
Full Name		Relationship (boss, manager, etc.)	
Company		Phone	
Address			

**PREVIOUS EMPLOYMENT**

Company				Phone		
Address				Supervisor		
Job Title						
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor/employer for a reference?				YES	NO	
Company				Phone		
Address				Supervisor		
Job Title						
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor/employer for a reference?				YES	NO	

**CURRENT EMPLOYMENT**

Company				Phone		
Address				Supervisor		
Job Title						
Responsibilities						
Date Started				Reason for Wanting To Leave		
May we contact your previous supervisor for a reference?				YES	NO	
Are you currently seeking employment elsewhere? If yes, explain				YES	NO	

**MILITARY SERVICE**

Branch				From		To	
Rank at Discharge				Type of Discharge			

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

I authorize ABC Seamless of NE Oklahoma to investigate all statements herein recorded, and release from liability all persons and organizations reporting information required by this application.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I also agree, if employed, to abide by the Company's smoking and drug use policy.

Signature				Date	
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