

White Eagle Conference Center

**PO Box 679
Hamilton, NY 13346**

Application for Employment

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

Personal Information

Date _____

Name: _____ Social Security#: _____
 First Middle Last

Present Address: _____
 Street City State Zip

Permanent Address: _____
 Street City State Zip

Telephone Number: _____ Are you 18 years or older? (Circle One) Yes No

Are you prevented from lawfully becoming employed in this country because of VISA or Immigration Status?

Yes _____ No _____

Employment Desired

Position: _____ Date you can start: _____ Salary Desired: _____

Are you employed now? Yes or No If so, may we inquire of your present employer? Yes or No

Ever applied to this company before? Where? _____ When? _____

Referred by: _____

| Education | Name & Location of School | *No. of Years Attended | *Did you Graduate | Subjects Studied |
|--|---------------------------|------------------------|-------------------|------------------|
| Grammar School | | | | |
| High School | | | | |
| College | | | | |
| Trade, Business or Correspondence School | | | | |

General

Subjects of Special Study or Research Work: _____

Special Skills: _____

Activities: (Civic, Athletic, Etc.) _____

Exclude Organizations, The Name of which indicates the Race, Creed, Sex, Age, Martial Status, Color or Nation of Origin of its members.

U.S. Military or Present Membership in
 Naval Service _____ Rank _____ National Guard or Reserves _____

*This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26, 1991.

Former Employers (List Below Last Three Employers, Starting with Last One First)

| Date Month and Year | Name & Address of Employer | Salary | Position | Reason for Leaving |
|------------------------|----------------------------|--------|----------|--------------------|
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |

Which of these jobs did you like the best? _____

What did you like most about this job? _____

References: Give the names of 3 persons NOT related to you, whom you have known at least one year.

| Name | Address | Business | Years Acquainted |
|------|---------|----------|------------------|
| 1 | | | |
| 2 | | | |
| 3 | | | |

The following statement applies in Maryland and Massachusetts. (Fill in name of state)

It is unlawful in the state of _____ to require or administer a lie detector test as a condition of employment or continued employment, an employer who violates this law shall be subject to criminal penalties and civil liability.

 Signature of Applicant

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at anytime. In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than it's president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing."

Date _____ Signature _____

DO NOT WRITE BELOW THIS LINE

Interviewed By:

Date:

Remarks:

Neatness

Ability

Hired: Yes or No

Position

Dept

Salary/Wage

Date Reporting to Work

Approved:

Employment Manager

Department Head

General Manager

This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination. This Application for Employment is sold for general use throughout the United States. TOPS assumes no responsibility for the inclusion in said form of any questions which, when asked by the Employer of the Job Applicant, may violate State and/or Federal Law.