

# Application for Employment

Position Desired: \_\_\_\_\_ Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

---

Name : \_\_\_\_\_  
Last First Full Name M.I. Jr., Sr., Etc.

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ E-mail address \_\_\_\_\_  
*For notification purposes only*

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work/Alternate Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

1) Current Address: \_\_\_\_\_ Apt# \_\_\_\_\_ City \_\_\_\_\_

County: \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

2) Previous Address: \_\_\_\_\_ Apt# \_\_\_\_\_ City \_\_\_\_\_

County: \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

3) Previous Address: \_\_\_\_\_ Apt# \_\_\_\_\_ City \_\_\_\_\_

County: \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

4) Driver's License: State: \_\_\_\_\_ Number: \_\_\_\_\_ Expires: \_\_\_\_\_

Address on License: \_\_\_\_\_

Name on Driver's License: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ Suffix \_\_\_\_\_

---

## EMPLOYMENT HISTORY

1. Present Employer: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_ per \_\_\_\_\_

Address: \_\_\_\_\_ City/ST \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Duties/ Responsibilities: \_\_\_\_\_

2. Previous Employer: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_ per \_\_\_\_\_

Address: \_\_\_\_\_ City/ST \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Duties/ Responsibilities: \_\_\_\_\_

3. Previous Employer: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_ per \_\_\_\_\_

Address: \_\_\_\_\_ City/ST \_\_\_\_\_ Phone # (\_\_\_\_) \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Duties/ Responsibilities: \_\_\_\_\_

**EDUCATION**

School	Name & Location / Address	Years Attended	Date Completed	Degree / Program
High School				
College				
Trade or Other				

**GENERAL QUESTIONNAIRE** – Please answer all questions

- 1) How were you referred here? \_\_\_\_\_ 2) Are you at least 18 years of age? Yes \_\_\_ No \_\_\_
  - 3) What date will you be available to work? \_\_\_\_\_ 4) Do you have a valid Driver's License? Yes \_\_\_ No \_\_\_
  - 5) Have you been convicted of a criminal offense? Yes \_\_\_ No \_\_\_ If yes, Offense: \_\_\_\_\_
  - 6) If #5 is yes, place of conviction: County: \_\_\_\_\_ State: \_\_\_\_\_ Mo/Yr. \_\_\_\_\_ - \_\_\_\_\_
- Please check appropriate space: Felony \_\_\_ Misdemeanor \_\_\_
- 7) List any special skills that may qualify you for this position: \_\_\_\_\_
- \_\_\_\_\_

---

**APPLICANT AUTHORIZATION**

- 1) All information I have submitted in this application is true and correct to the best of my knowledge. I understand that false information will be cause for dismissal. I hereby authorize this company and ACS Data Search the right to process this application and to verify all information herein, including conducting a background check for Criminal Record, Police Record and Motor Vehicle record information. Additionally, I authorize all corporations, companies, academic institutions, law enforcement agencies, and current and former employers to release information they may have about me and release them from any liability or responsibility from doing so.
- 2) I understand that this application is strictly an application for employment and in no way suggests that I have been or will be hired by this company.
- 3) I hereby state that I am a prospective employee and authorize this company or its agent(s) to obtain my abstract of driver record from the appropriate state agency, to be used exclusively by said company or its agent to determine whether I should be employed to operate a motor vehicle upon the public highways of the state and/or for the purpose of underwriting insurance in connection with such employment. I further understand that no information contained in the driver record shall be divulged, sold, assigned, or otherwise transferred to a third person or party.
- 4) I authorize this company or agent to use facsimile or electronic means, such as email or internet, to communicate the contents of this release or report to company or agent.
- 5) The undersigned agrees that this application and any information reports will remain the property of ACS Data Search. A photographic, faxed, or electronic copy of this authorization shall be as valid as the original.

Print Name: \_\_\_\_\_ Date : \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_

**CONSUMER REPORT AUTHORIZATION**

Name: \_\_\_\_\_

DOB \_\_\_\_\_

(For Identification purposes only)

Address: \_\_\_\_\_

City, St Zip: \_\_\_\_\_

SSN: \_\_\_\_\_

In compliance with the **FAIR CREDIT REPORTING ACT** this notice is to inform you that the processing of this application includes but is not limited to making any inquiries deemed necessary to verify the accuracy of the information herein, including procuring consumer reports from **Consumer Credit Reporting Agencies and obtaining credit information from other Credit Institutions, requests reports regarding driving record, court records, education, credentials, and references for the purpose of obtaining employment.** If any adverse decision is made due to information in the consumer report, I may request and be given the name and address of the agency or the source which provided the information.

The undersigned is the person named above and hereby authorizes ACS Data Search to obtain such consumer reports and information.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed