

# COALESCENCE

3455 MILLENNIUM COURT  
 COLUMBUS, OH 43219  
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## APPLICATION FOR EMPLOYMENT

### PERSONAL INFORMATION

|                      |      |                        |      |   |  |
|----------------------|------|------------------------|------|---|--|
| NAME                 |      | SOCIAL SECURITY NUMBER |      | DATE  |  |
| STREET               |      |                        | CITY |   | STATE ZIP  |
| PHONE                |      | E-MAIL                 |      | ARE YOU 18 OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO | ARE YOU A U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| IN CASE OF EMERGENCY | NAME | PHONE                  |      | CELL  |  |

### EMPLOYMENT DESIRED

|   |  |                    |                |
|---|--|--------------------|----------------|
| POSITION  | <input type="checkbox"/> 1ST SHIFT<br><input type="checkbox"/> 2ND SHIFT                             | DATE YOU CAN START | SALARY DESIRED |
| ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO  | IF SO MAY WE CONTACT YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO |                    |                |
| REFERRED BY   | EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO        | WHERE?             | WHEN?          |
| HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE (FELONY) WITHIN THE LAST 5 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO | IF YES, EXPLAIN.   |                    |                |

### EDUCATION

|                  | SCHOOL NAME AND LOCATION | NUMBER OF YEARS ATTENDED | SUBJECTS STUDIED |
|------------------|--------------------------|--------------------------|------------------|
| HIGH SCHOOL      |                          |                          |                  |
| HIGHER EDUCATION |                          |                          |                  |
| OTHER EDUCATION  |                          |                          |                  |
| ADDITIONAL INFO  |                          |                          |                  |

### GENERAL

|  |           |                    |
|--|-----------|--------------------|
| SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK |           |                    |
| SPECIAL SKILLS                             |           |                    |
| ACTIVITIES: (CIVIC, ATHLETIC, ETC.)        |           |                    |
| VETERAN                                    | LAST RANK | PRESENT MEMBERSHIP |

**FORMER EMPLOYERS** ( LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST ).

| DATES FROM   TO | EMPLOYER NAME & ADDRESS | SALARY | POSITION | REASON FOR LEAVING |
|-----------------|-------------------------|--------|----------|--------------------|
|                 |                         |        |          |                    |
|                 |                         |        |          |                    |
|                 |                         |        |          |                    |
|                 |                         |        |          |                    |
|                 |                         |        |          |                    |
|                 |                         |        |          |                    |

WHICH OF THESE JOBS DID YOU LIKE BEST & WHY?

**REFERENCES:** GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU. WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR.

| NAME | ADDRESS / PHONE NUMBER | RELATIONSHIP | YEARS KNOWN |
|------|------------------------|--------------|-------------|
|      |                        |              |             |
|      |                        |              |             |
|      |                        |              |             |

**ADDITIONAL INFORMATION**

|  |
|--|
|  |
|  |

" I CERTIFY THAT INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND COMPLETE. I UNDERSTAND THAT FALSE INFORMATION MAY BE GROUNDS FOR NOT HIRING ME OR FOR IMMEDIATE TERMINATION OF EMPLOYMENT AT ANY POINT IN THE FUTURE, IF I AM HIRED. I AUTHORIZE THE VERIFICATION OF ANY OR ALL INFORMATION LISTED ABOVE. "

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

|   |                              |
|---|------------------------------|
| INTERVIEWED BY _____  | DATE _____                   |
| REMARKS: _____  |                              |
|   |                              |
| HIRED <input type="checkbox"/> YES<br><input type="checkbox"/> NO | POSITION _____               |
| DEPARTMENT _____  |                              |
| SALARY/WAGE _____   | DATE REPORTING TO WORK _____ |
| APPROVED BY: _____  | DATE _____                   |