

AFI Employment Application

APPLICANT INFORMATION									
Last Name:			First:			M.I.	Date:		
Street Address:						Apartment/Unit #:			
City:			State:			Zip Code:			
Phone:			E-mail Address:						
Date Available?			Social Security #:			Desired Salary?			
Position Applied for?									
Are you a citizen of the United States?		Yes	No	If no, are you authorized to work in the U.S.?		Yes	No		
Have you ever worked for this Company?		Yes	No	If so, when?					
Have you ever been convicted of a felony?		Yes	No	If yes, explain?					
EDUCATION									
High School:				Address:					
From:	To:	Did you graduate?		Yes:	No:	Degree:			
College:				Address:					
From:	To:	Did you graduate?		Yes:	No:	Degree:			
Other:				Address:					
From:	To:	Did you graduate?		Yes:	No:	Degree:			
REFERENCES									
<i>Please list three professional references.</i>									
Full Name:					Relationship:				
Company:					Phone:				
Address:									
Full Name:					Relationship:				
Company:					Phone:				
Address:									
Full Name:					Relationship:				
Company:					Phone:				
Address:									

PREVIOUS EMPLOYMENT							
Company:				Phone:			
Address:				Supervisor:			
Job Title:		Starting Salary:		\$	Ending Salary:		\$
Responsibilities:							
From:		To:		Reason for Leaving?			
May we contact your previous supervisor for a reference?				Yes	No		
Company:				Phone:			
Address:				Supervisor:			
Job Title:		Starting Salary:		\$	Ending Salary:		\$
Responsibilities:							
From:		To:		Reason for Leaving?			
May we contact your previous supervisor for a reference?				Yes	No		
Company:				Phone:			
Address:				Supervisor:			
Job Title:		Starting Salary:		\$	Ending Salary:		\$
Responsibilities:							
From:		To:		Reason for Leaving?			
May we contact your previous supervisor for a reference?				Yes	No		
Company:				Phone:			
Address:				Supervisor:			
Job Title:		Starting Salary:		\$	Ending Salary:		\$
Responsibilities:							
From:		To:		Reason for Leaving?			
May we contact your previous supervisor for a reference?				Yes	No		
MILITARY SERVICE							
Branch:				From:		To:	
Rank at Discharge:				Type of Discharge?			
If other than honorable, explain?							
DISCLAIMER AND SIGNATURE							
I certify that my answers are true and complete to the best of my knowledge.							
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.							
Signature:						Date:	