

ROSEWOOD VILLA APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE
EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

DATE: _____

| | | | |
|-----------------|--------------|--------------------|-----|
| NAME: | | SOCIAL SECURITY NO | |
| PRESENT ADDRESS | City | State | zip |
| PHONE NO. | REFEREED BY: | | |

EMPLOYMENT DESIRED

| | | |
|--|---|----------------|
| POSITION | DATE YOU CAN START | DESIRED SALARY |
| ARE YOU CURRENTLY EMPLOYED? YES <input type="checkbox"/> NO <input type="checkbox"/> | IF SO CAN MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? YES <input type="checkbox"/> NO <input type="checkbox"/> | |

| NAME AND LOCATION OF SCHOOL | YEARS ATTENDED | DID YOU GRADUATE | SUBJECT STUDIED |
|-----------------------------|----------------|------------------|-----------------|
| ELEMENTARY SCHOOL | | | |
| HIGH SCHOOL | | | |
| COLLEGE | | | |
| TRADE OR BUSINESS SCHOOL | | | |

SPECIAL TRAINING/SKILLS AND/OR CERTIFICATES

| | |
|----------------------|--------------|
| | |
| | |
| | |
| | |
| U.S MILITARY SERVICE | YEARS SERVED |

FORMER EMPLOYERS

| LIST BELOW LAST FOUR EMPLOYERS STARTING WITH LAST ONE FIRST: | | | |
|---|-------------------------------------|----------|--------------------|
| DATE MONTH/YEAR | NAME, ADDRESS & PHONE # OF EMPLOYER | POSITION | REASON FOR LEAVING |
| FROM | | | |
| TO | | | |
| SUPERVISOR NAME: | | PHONE # | |
| FROM | | | |
| TO | | | |
| SUPERVISOR NAME: | | PHONE # | |
| FROM | | | |
| TO | | | |
| SUPERVISOR NAME: | | PHONE # | |
| FROM | | | |
| TO | | | |
| SUPERVISOR NAME: | | PHONE # | |
| ARE YOU OVER 18 YEARS OF AGE? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| IF "YES" PLEASE EXPLAIN: _____ | | | |

CONTACTS IN CASE OF EMERGENCY

| NAME | DAY PHONE | EVENING PHONE | RELATIONSHIP |
|------|-----------|---------------|--------------|
| | | | |
| | | | |

AUTHORIZATION- PLEASE READ AND SIGN

I certify that the information contained in this application is correct to the best to my knowledge and understanding that falsification of this information is grounds for refusal to hire or if hired, dismissal. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education or any other information they might have, personal or otherwise, with regards to any of the subjects covered by this application and release all such parties from all liability for any damage that may result from furnishing such information to you. I authorize you to request and receive such information. In consideration for my employment and my being considered for employment by your company, I agree to conform to the rules and regulations of the company and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by your company at any time, at the company's sole option and without any prior notice to me. I further acknowledge that my employment may be terminated, and any offer on employment, if such is made, maybe withdrawn, with or without prior notice, at any time, at the option of the company or myself. I understand that no representative of the company has any authority to enter into any agreement for employment for any special period of time, or assure any benefits or terms and conditions of employment or many any agreement contrary to the foregoing. I understand that this application will remain active for employment consideration for no more than 90 days from the date it was completed. If you wish to be considered after that date you must reapply.

I have read and understand the above.

APPLICANT SIGNATURE: X _____ DATE: _____

*****DO NOT WRITE BELOW THIS LINE*****

INTERVIEWD BY: _____ DATE: _____

| REMARKS: |
|----------|
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REFERENCE CHECKS:

| DATE | NAME/COMPANY | COMMENTS |
|------|--------------|----------|
| | | |
| | | |
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