



AN EQUAL OPPORTUNITY EMPLOYER

STATE & FEDERAL LAW PROHIBITS DISCRIMINATION BASED ON AGE, SEX OR NATIONAL ORIGIN

NAME: (LAST, FIRST, MIDDLE) \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_ TOTAL NO. OF INCOME TAX EXEMPTIONS \_\_\_\_\_

ADDRESS: STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ HOME TELEPHONE \_\_\_\_\_ ALT. TELEPHONE \_\_\_\_\_

CITY & STATE OF BIRTH \_\_\_\_\_ RIGHT TO WORK IN U.S.  YES  NO ALIEN REG. # \_\_\_\_\_ ALIEN REG. EXP. DATE \_\_\_\_\_ SMOKING ENVIRONMENT  YES  NO EMAIL ADDRESS \_\_\_\_\_

IN CASE OF EMERGENCY, NOTIFY - NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_

WHAT POSITION ARE YOU APPLYING FOR? \_\_\_\_\_ DATE AVAILABLE TO WORK \_\_\_\_\_ MINIMUM RATE PER HOUR \$ \_\_\_\_\_ /HR. HAVE YOU EVER BEEN CONVICTED OF A CRIME?  YES  NO HOW DID YOU HEAR OF US? \_\_\_\_\_

WHICH DAYS ARE YOU AVAILABLE TO WORK FULL TIME  MON  TUE  WED  THU  FRI  SAT  SUN CITIES AVAILABLE TO WORK IN \_\_\_\_\_

1ST SHIFT AVAILABLE TO WORK FROM: \_\_\_\_\_ A.M. TO \_\_\_\_\_ A.M.  2ND SHIFT \_\_\_\_\_ P.M. TO \_\_\_\_\_ P.M.  3RD SHIFT \_\_\_\_\_ P.M. TO \_\_\_\_\_ P.M.

AVAILABLE LONG TERM ASSIGNMENT  WILL ACCEPT SAME DAY ASSIGNMENT  TEMP TO HIRE  CAR AVAILABLE?  YES  NO  RESUME ATTACHED?  YES  NO

**TEST RESULTS**  
WPM \_\_\_\_\_ speed \_\_\_\_\_ errors \_\_\_\_\_ %  
LTR \_\_\_\_\_  
ALPHA \_\_\_\_\_  
NUM \_\_\_\_\_  
10 KEY \_\_\_\_\_  
SOFTWARE PACKAGES: \_\_\_\_\_  
CLERICAL # WRONG  
1ST \_\_\_\_\_ 3RD \_\_\_\_\_  
2ND \_\_\_\_\_ 4TH \_\_\_\_\_  
SPELLING \_\_\_\_\_

**WORK SKILLS - CHECKS YOUR SKILLS AND KIND OF WORK YOU HAVE DONE.**

**TYPING - APPROX. SPEED** \_\_\_\_\_ W.P.M.  
 Memory  Manual  Electric  Selectric  Stencils and Masters  Statistical Typing  Invoicing & Billing  Steno  Transcriber

**DATA ENTRY:**  
ALPHA  NUMERIC   
**RECEPTIONIST:**  
# Of Incoming Lines \_\_\_\_\_  
# Of Extensions \_\_\_\_\_  
**SOFTWARE PACKAGES:** \_\_\_\_\_

**BUSINESS MACHINES:**  
 Adding Machines  Full  10 Key  Touch  Fax  Postage Meter  Calculators  
Kinds \_\_\_\_\_  
**OTHER:** \_\_\_\_\_

**CLERICAL:**  
 Filing  Alpha  Numeric  Coding  Posting  Other  Bulk Mail  Telemarketing  Customer Service  
**BOOKKEEPING:**  
 Full Charge  Assistant  Accts. Pay  Manual  Accts. Rec.  Computer  Bookkeeping / Machines  Collections  Payroll  Reconciliations  Taxes

**COMPUTERS:**  
Types Of Computers:  MAIN  MINI  MAC  PC  
**STENOGRAPHIC:**  
Approx. Speed \_\_\_\_\_ W.P.M.  
 Legal Steno  Medical Steno  Transcribing Machines  
**FOREIGN LANGUAGES:**  Speak  Read  Write  
**OTHER SPECIAL SKILLS & EXPERIENCES:** \_\_\_\_\_

PREVIOUS EMPLOYMENT	NAME OF EMPLOYER	PHONE OR ADDRESS	SUPERVISOR	PAY P/HOUR	POSITION	REASON FOR LEAVING
FROM _____ TO _____						

**EDUCATION** **NAME OF SCHOOL** **DEGREE** **GRADUATED?** **HAVE YOU EVER WORKED FOR OR APPLIED WITH A TEMPORARY SERVICE?  YES  NO**  
IF YES, PLEASE LIST THE FIRMS AT WHICH YOU WORKED AS A TEMPORARY.  
Firm Names & Addresses: \_\_\_\_\_

I hereby authorize you and all former employers, and others given by me as a reference, to answer all questions and to give all information in connection with this application or in any way concerning me. I agree, if employed by you, that if ever I make claims against you for personal injuries, upon your request I shall submit to drug screens and examinations by physicians of your selection. Your employment of me may be terminated by you at any time without any liability to me except for wages and salary as have been earned by me at the date of such termination. I understand that it is my responsibility to notify you of my availability on a weekly basis at a minimum, and if I do not, I will be considered unavailable for work.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_