

# Santmyer/SOCI Application for Employment

Date \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Last                      First                      Middle

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Address \_\_\_\_\_

Street    City    State    Zip Code

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Phone # \_\_\_\_\_ Are you 18 years or older?      Yes      No

## Employment Desired

Position \_\_\_\_\_ Date you can start? \_\_\_\_\_ Salary Desired? \_\_\_\_\_

Are you employed now?      Yes      No      If so, may we inquire of your present employer?      Yes      No

Ever applied to this company before?      Yes      No      Where? \_\_\_\_\_ When? \_\_\_\_\_

Referred by: \_\_\_\_\_

Education	Name/Location of School	# of years attended	Did you Graduate?	Subjects Studied
Grammar School				
High School				
College				
Other School				

Subjects of Special Study or Research Work: \_\_\_\_\_

Special Skills \_\_\_\_\_

Activities: (civic, athletic, etc.) \_\_\_\_\_

US Military or Naval Service \_\_\_\_\_

Rank

Present Membership in National Guard or Reserves

**Former Employers** (List below last three employers, starting with last one first)

Date Month & Year	Name & Address of Employer	Salary	Position	Reason for leaving
From				
To				
From				
To				
From				
To				
From				
To				

Which of these jobs did you like best? \_\_\_\_\_

What did you like most about this job? \_\_\_\_\_

# Santmyer/SOCI Application for Employment (cont.)

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
Last First Middle

**References:** Give the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted

In Case of  
Emergency Notify:

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone Number \_\_\_\_\_

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice. At any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice. At any time by the company, I understand that a representative from the HR Department, and then only when in writing and signed by the HR Department, has any authority to enter into any agreement for any specific period of time, or to make any agreement contrary to the foregoing.

**Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

Do Not Write Below This Line

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_

Neatness \_\_\_\_\_ Ability \_\_\_\_\_

Hired? Yes No Position Department

Salary/Wage \_\_\_\_\_ Date reporting to work: \_\_\_\_\_

Approved \_\_\_\_\_