

PLEASE PRINT ALL  
INFORMATION  
REQUESTED EXCEPT FOR  
SIGNATURE



DATE: \_\_\_\_\_

**APPLICATION FOR EMPLOYMENT**  
**APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS**

PLEASE COMPLETE PAGES 1-5

Name: \_\_\_\_\_  
*Last First Middle Maiden*

Present Address: \_\_\_\_\_  
*Number Street City State Zip*

How Long?: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

**Employment Desired:**  
*(Circle One)*

FULL TIME

PART-TIME ONLY

FULL OR PART-TIME

If under 18, please list age: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

Salary Desired: \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_

Can you work nights? YES NO

When is your available start date? \_\_\_\_\_

**Days/hours available to work:**

No Pref \_\_\_\_\_ Thu \_\_\_\_\_

Mon \_\_\_\_\_ Fri \_\_\_\_\_

Tue \_\_\_\_\_ Sat \_\_\_\_\_

Wed \_\_\_\_\_ Sun \_\_\_\_\_

**EDUCATION**

**HIGH SCHOOL :**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

No. of years attended: \_\_\_\_ Diploma/GED: \_\_\_\_\_

**BUSINESS/TRADE SCHOOL:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

No. of years attended: \_\_\_\_ Major/Degree: \_\_\_\_\_

**UNIVERSITY/COLLEGE:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

No. of years attended: \_\_\_\_ Major/Degree: \_\_\_\_\_

**PROFESSIONAL SCHOOL:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

No. of years attended: \_\_\_\_ Major/Degree: \_\_\_\_\_

**Have you ever been convicted of a crime?** YES NO

If yes, explain the number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## APPLICANT FOR EMPLOYMENT

Do you have a valid driver's license? YES NO What is your means of transportation to work? \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ State of Issue: \_\_\_\_\_  
OPERATOR COMMERCIAL (CDL) CHAUFFEUR

Have you had any accidents during the past three years? \_\_\_\_\_ How many? \_\_\_\_\_  
Have you had any moving violations in the past 3 years? \_\_\_\_\_ How many? \_\_\_\_\_

### OFFICE ONLY

TYPING: Yes No

WPM: \_\_\_\_\_

10-KEY: Yes No

PERSONAL COMPUTER: Yes No

PC

MAC

Word Processing:	YES	NO
Microsoft Office:	YES	NO
QuickBooks:	YES	NO
Excel/Spreadsheets:	YES	NO

Other Software/Relevant Office Skills:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### REFERENCES

Please list three references other than relatives or previous employers:

Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_  
Position: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## APPLICATION FOR EMPLOYMENT

Have you ever been in the military?    YES            NO

Are you now a member of the National Guard?    YES            NO

Specialty: \_\_\_\_\_ Date Entered: \_\_\_\_\_ Discharge Date: \_\_\_\_\_

*Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give the firm name. Attach additional sheets if necessary.*

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name of Last Supervisor: \_\_\_\_\_

Employment Dates:

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

Pay or Salary:

START: \_\_\_\_\_ FINAL: \_\_\_\_\_

Your last job title: \_\_\_\_\_

*Reason for leaving (be specific):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at the company:* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name of Last Supervisor: \_\_\_\_\_

Employment Dates:

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

Pay or Salary:

START: \_\_\_\_\_ FINAL: \_\_\_\_\_

Your last job title: \_\_\_\_\_

*Reason for leaving (be specific):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at the company:* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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## APPLICATION FOR EMPLOYMENT

*Please continue to list your work experience for the past five years.*

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Name of Last Supervisor: \_\_\_\_\_  
\_\_\_\_\_  
Employment Dates:  
FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
Pay or Salary:  
START: \_\_\_\_\_ FINAL: \_\_\_\_\_  
Your last job title: \_\_\_\_\_

*Reason for leaving (be specific):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at the company:* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Name of Last Supervisor: \_\_\_\_\_  
\_\_\_\_\_  
Employment Dates:  
FROM: \_\_\_\_\_ TO: \_\_\_\_\_  
Pay or Salary:  
START: \_\_\_\_\_ FINAL: \_\_\_\_\_  
Your last job title: \_\_\_\_\_

*Reason for leaving (be specific):*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at the company:* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

May we contact your present employer?

YES

NO

Did you complete this application yourself?

YES

NO

If not, who did? \_\_\_\_\_

*Thank you for your interest in our business and taking the time to fill out this application. Please make sure you have filled out all 5 pages of the application.*



# PLEASE READ CAREFULLY APPLICATION FORM WAIVER

In exchange for the consideration of my job application by PENCO Restoration, I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other PENCO Restoration practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of PENCO Restoration, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President/General Manager of PENCO Restoration. Both the undersigned and PENCO Restoration may end the employment relationship at any time, without specified notice or reason. If employed, I understand that PENCO Restoration may unilaterally change or revise their benefits, policies, and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give PENCO Restoration permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release PENCO Restoration from any liability as a result of such contract.

I also understand that (1) PENCO Restoration has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, PENCO Restoration may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, PENCO Restoration, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with PENCO Restoration shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with PENCO Restoration is terminable at will for any reason by either party.

Name of Applicant (*Printed*): \_\_\_\_\_ Date: \_\_\_\_\_

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*PENCO Restoration is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with PENCO Restoration depends solely on your qualifications.*

*Thank you for completing this application form and for your interest in our business.*