

APPLICATION FOR EMPLOYMENT
PRE-EMPLOYMENT QUESTIONNAIRE



THE COTTON PATCH IS AN EQUAL OPPORTUNITY EMPLOYER. IT IS OUR POLICY THAT ALL APPLICANTS BE CONSIDERED SOLELY ON THE BASIS OF QUALIFICATIONS AND ABILITY, WITHOUT REGARD TO RACE, RELIGION, SEX, AGE, NATIONAL ORIGIN, DISABILITY OR VETERAN STATUS.

PLEASE PRINT AND COMPLETE FORM IN DETAIL. PLEASE BE SPECIFIC AND FILL IN ALL APPROPRIATE BLANKS. ALL INFORMATION GIVEN WILL BE HELD IN STRICT CONFIDENCE.

PERSONAL INFORMATION

NAME (LAST NAME FIRST)		SOCIAL SECURITY #
PRESENT ADDRESS		CITY, STATE, ZIP
PERMANENT ADDRESS		CITY, STATE, ZIP
PHONE NUMBER ()		REFERRED BY

EMPLOYMENT DESIRED

POSITION DESIRED	DATE AVAILABLE
SALARY DESIRED	ARE YOU EMPLOYED? YES <input type="checkbox"/> NO <input type="checkbox"/>
IF CURRENTLY EMPLOYED, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?	YES <input type="checkbox"/> NO <input type="checkbox"/>
HAVE YOU BEEN PREVIOUSLY EMPLOYED BY US?	YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, WHEN?
DO YOU HAVE THE LEGAL RIGHT TO WORK PERMANENTLY IN THE U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/> IF NO, EXPLAIN
HAVE YOU EVER BEEN CONVICTED OF A FELONY?	YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, EXPLAIN

EDUCATION HISTORY

NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	DEGREE/FIELD OF STUDY
HIGH SCHOOL			
COLLEGE			
OTHER			

REFERENCES (LIST BELOW THE NAMES OF THREE PERSONS, NOT RELATED TO YOU, WHO YOU HAVE KNOWN FOR AT LEAST ONE YEAR.)

NAME	ADDRESS	PHONE	BUSINESS	YEARS KNOWN

CONTINUED ON OTHER SIDE

GENERAL INFORMATION

SUBJECTS OF SPECIAL STUDY/RESEARCH OR SPECIAL TRAINING/SKILLS

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH MOST RECENT)

DATE (MONTH & YEAR)	NAME, ADDRESS AND PHONE NUMBER OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

I also understand that a criminal background check may be required prior to a formal offer of employment with the Cotton Patch.

This waiver does not permit the release or use of any disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

DATE _____ SIGNATURE _____

-----DO NOT WRITE BELOW THIS LINE -----

INTERVIEWED BY _____ DATE _____

REMARKS

HIRED _____ POSITION _____ WILL REPORT _____ SALARY _____