

# EMPLOYMENT APPLICATION



STATE & FEDERAL LAW PROHIBIT  
DISCRIMINATION BASED ON AGE, SEX, OR  
NATIONAL ORIGIN  
AN EQUAL OPPORTUNITY EMPLOYER

LAST NAME		FIRST NAME		M.I.	SOCIAL SECURITY NUMBER		
ADDRESS STREET		CITY	STATE	ZIP	HOME TELEPHONE	ALT TELEPHONE	CELL PHONE
CITY AND STATE OF BIRTH		CITIZEN OF U.S. <input type="checkbox"/> YES <input type="checkbox"/> NO		E-MAIL ADDRESS		HAVE YOU EVER BEEN CONVICTED OF A CRIME? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IN CASE OF EMERGENCY, NOTIFY - NAME:		ADDRESS				TELEPHONE	
WHAT POSITIONS ARE YOU APPLYING FOR:			DATE AVAILABLE FOR WORK	MINIMUM RATE PER HOUR \$ _____/HR		HOW DID YOU HEAR OF US?	

WHICH DAYS ARE YOU AVAILABLE TO WORK FULL TIME <input type="checkbox"/> MON <input type="checkbox"/> TUE <input type="checkbox"/> WED <input type="checkbox"/> THU <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> SUN		CITIES AVAILABLE TO WORK IN	<input type="checkbox"/> 1ST SHIFT <input type="checkbox"/> 2ND SHIFT <input type="checkbox"/> 3RD SHIFT	AVAILABLE TO WORK FROM _____ A.M. to _____ A.M. _____ P.M. to _____ P.M.	<input type="checkbox"/> AVAILABLE LONG TERM ASSIGNMENT <input type="checkbox"/> WILL ACCEPT SAME DAY ASSIGNMENT <input type="checkbox"/> TEMP TO HIRE <input type="checkbox"/> DIRECT HIRE <input type="checkbox"/> CAR AVAILABLE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> RESUME ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO
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**INDUSTRIAL WORK SKILLS** - Check your skills and kind of work that you have done.

<b>GENERAL</b> <input type="checkbox"/> Carpenter <input type="checkbox"/> Construction <input type="checkbox"/> Electrician <input type="checkbox"/> Painter <input type="checkbox"/> Plumber <input type="checkbox"/> Inventory <input type="checkbox"/> HVAC <input type="checkbox"/> Mover <input type="checkbox"/> Welder <input type="checkbox"/> Laundry <input type="checkbox"/> Solderer <input type="checkbox"/> Road Const. <input type="checkbox"/> Demolition <input type="checkbox"/> Digger/Raker <input type="checkbox"/> Supervisor <input type="checkbox"/> Casual Labor <input type="checkbox"/> Mechanic <input type="checkbox"/> _____ <input type="checkbox"/> Validator <input type="checkbox"/> _____	<b>FACTORY</b> <input type="checkbox"/> Mechanical Assembler <input type="checkbox"/> Electronic Assembler <input type="checkbox"/> Inspector <input type="checkbox"/> Packager <input type="checkbox"/> Quality Control <input type="checkbox"/> Machine Operator <input type="checkbox"/> _____ <input type="checkbox"/> _____	<b>MAINTENANCE</b> <input type="checkbox"/> Building Repair <input type="checkbox"/> Cleaning <input type="checkbox"/> Floor Care <input type="checkbox"/> Landscaping <input type="checkbox"/> Lawn Care <input type="checkbox"/> Hotel Cleaning <input type="checkbox"/> Janitorial <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____	<b>EQUIPMENT</b> <input type="checkbox"/> Truck <input type="checkbox"/> Backhoe <input type="checkbox"/> Tractor <input type="checkbox"/> Outside Fl. <input type="checkbox"/> Crane <input type="checkbox"/> Drill <input type="checkbox"/> Saw <input type="checkbox"/> Nail Gun <input type="checkbox"/> Jack Hammer <input type="checkbox"/> _____	<b>WAREHOUSE</b> <input type="checkbox"/> Computer Skills <input type="checkbox"/> Receiving <input type="checkbox"/> Shipping <input type="checkbox"/> Load/Unload <input type="checkbox"/> Hand Jack <input type="checkbox"/> Forklift <input type="checkbox"/> Standing <input type="checkbox"/> Sitting	<b>ARE YOU COLLECTING UNEMPLOYMENT COMPENSATION?</b> <input type="checkbox"/> YES(____/WK) <input type="checkbox"/> NO  <b>SUPPLIES AVAILABLE</b> <input type="checkbox"/> Hard Hat <input type="checkbox"/> Tools <input type="checkbox"/> Safety Glasses <input type="checkbox"/> Steel Toe Work Boots  <b>TYPE OF WORK DESIRED</b> <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	IF RELEVANT FOR THE JOB YOU ARE APPLYING: ARE YOU ABLE TO LIFT 50 LB. SACKS ON A CONTINUED HR-BY-HR, DAY-BY-DAY BASIS? <input type="checkbox"/> YES <input type="checkbox"/> NO  DO YOU PREFER TO WORK IN A SMOKING OR NON-SMOKING ENVIRONMENT? <input type="checkbox"/> SMOKING <input type="checkbox"/> NON-SMOKING  <b>DRIVER'S LICENSE?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Class C <input type="checkbox"/> CDL <input type="checkbox"/> Class A <input type="checkbox"/> Class B License Number _____
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PREVIOUS EMPLOYMENT		NAME OF EMPLOYER	PHONE OR ADDRESS	SUPERVISOR	DOES COMPANY USE TEMPORARY WORKERS	PAY P/HOUR	POSITION	REASON FOR LEAVING
MO./YR.	MO./YR.				YES NO			
					YES NO			
					YES NO			
					YES NO			

HAVE YOU EVER WORKED FOR OR APPLIED WITH A TEMPORARY SERVICE  YES  NO  
IF YES, PLEASE LIST LAST POSITION FIRST

FROM (MO./YR.)	TO (MO./YR.)	TEMPORARY SERVICE	COMPANY ASSIGNED	POSITION	PAY RATE

**EDUCATION**

HIGH SCHOOL NAME	YEARS ATTENDED 1 2 3 4	GRADUATED <input type="checkbox"/> YES <input type="checkbox"/> NO	MAJOR STUDY
HIGHER EDUCATION - College, Trade or Business School	YEARS ATTENDED 1 2 3 4	GRADUATED <input type="checkbox"/> YES <input type="checkbox"/> NO	MAJOR STUDY

**COMPUTER SOFTWARE**

Please rate your knowledge level under software programs you have experience using:

<input type="checkbox"/> <b>MICROSOFT ACCESS</b> <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>MICROSOFT EXCEL</b> <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>MICROSOFT POWERPOINT</b> <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>MICROSOFT WORD</b> <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>LOTUS 1-2-3</b> <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>PEACHTREE ACCOUNTING</b> <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>QUICKBOOKS</b> <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>WINDOWS</b> <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>WORD PERFECT</b> <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>PHOTO EDITING SOFTWARE</b> Programs used: <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>INTERNET BROWSER/E-MAIL</b> Programs used: <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED
<input type="checkbox"/> <b>INTERNET WEB DESIGN</b> Programs used: <input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED

**CLERICAL WORK SKILLS - Check your skills and kind of work that you have done.**

**TYPING**

APPROX. SPEED  
\_\_\_\_\_ W.P.M.

- Statistical Typing
- Invoicing & Billing
- Steno
- Transcriber

**DATA ENTRY**

- Alpha
- Numeric

**BUSINESS MACHINES**

- Adding Machines
  - Full
  - 10 Key
  - Touch
- Fax Machine
- Postage Meter

**RECEPTIONIST**

# OF INCOMMING LINES  
\_\_\_\_\_

# OF EXTENSIONS  
\_\_\_\_\_

**SWITCHBOARD SYSTEMS**  
\_\_\_\_\_

**CLERICAL**

- Filing
  - Alpha  Numeric
  - Coding  Posting
  - Other
- Bulk Mail
- Telemarketing
- Customer Service

**ACCOUNTING**

- 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
- Medical Steno
- Transcribing Machines Kinds:  
\_\_\_\_\_

**FOREIGN LANGUAGES**

- Speak \_\_\_\_\_
- Read \_\_\_\_\_
- Write \_\_\_\_\_

**OTHER SOFTWARE PROGRAMS USED:**

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

**OTHER SPECIAL SKILLS AND EXPERIENCE:**

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\_\_\_\_\_  
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I hereby declare that all statements contained in this application are true and correct and understand that false or inaccurate information in the application will be the basis for termination. I authorize you and all former employers, and others given by me as reference, to answer all questions and to give all information in connection with this application or in any way concerning me. I authorize TempStar Staffing Companies to release the information contained herein and its findings and work history of my employment to other firms or persons upon request. I hereby authorize TempStar Staffing Companies to investigate my background inclusive of any criminal records. I also agree to submit a drug test upon request or as specified by TempStar Staffing Company's Substance Abuse Policy. I further agree that if employed by TempStar Staffing Companies, that if I ever make any claims against you for personal injuries, upon your request, I shall submit to drug screens and examinations by physicians of your selection. TempStar Staffing Company's employment of me may be terminated at any time without any liability to me except for wages and salary earned by me at the date of such termination. I understand that it is my responsibility to notify TempStar Staffing Companies of my availability on a weekly basis at a minimum or at the end of an assignment, and if I do not, I will be considered unavailable for work.

**SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_