## APPLICATION FOR EMPLOYMENT

## PRE-EMPLOYMENT QUESTIONNAIRE EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATIO	N			DATE			
NAME (LAST NAME FIRST)	SOCIAL SECURITY NO.						
PRESENT ADDRESS		CITY		STATE		ZIP CODE	
PERMANENT ADDRESS		CITY		STATE		ZIP CODE	
PHONE NO.	n to look as below	REFERR	ED BY			And the last of th	
( )					e Harris	type Killian hartenster.	
EMPLOYMENT DESIRED							
POSITION			DATE YOU	CAN START	SA	LARY DESIRED	
						Lifeus to notification more	
ARE YOU EMPLOYED? YES NO			IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?			YES NO	
EVER APPLIED TO THIS COMPANY BEFORE?	YES NO	WHERE?	nikleeb to	earto este Calle es	WHEN?	tell séals teldew sinf	
EDUCATION HISTORY						_ to t 57%	
NAME &	LOCATION OF SCHO	OOL	A	YEARS ITENDED	DID YOU GRADUATE?	SUBJECTS STUDIED	
GRAMMAR SCHOOL						YE COVERVED BY	
HIGH SCHOOL						ZANAM3	
COLLEGE							
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL							
GENERAL INFORMATION							
SUBJECTS OF SPECIAL STUDY/ WORK OR SPECIAL TRAINING/S							
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LLO MILITARY OR			Tau.				
U.S. MILITARY OR NAVAL SERVICE			RAN				
FORMER EMPLOYERS (LIS	ST BELOW LAST FOUR I	EMPLOYERS, STA	RTING WITH LA	AST ONE FIRST	)		
MONTH AND I LAIT	AME & ADDRESS OF	EMPLOYER	SALARY	POSITION	V sa maraka F	REASON FOR LEAVING	
FROM TO		4401		2432			
FROM							
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FROM							

Adams 9661 APR 1998

FROM

CONTINUED ON OTHER SIDE

NAME	ADDRESS		SS	BUSINESS	YEARS KNOWN
UTHORIZATION					
"I certify that the understand that, if I authorize inve to give you any armay have, person from utilization of I also understal agreement for eming, unless it is in This waiver doe	employed, falsified stigation of all standall information of all or otherwise, and such information. Indicate and agree that ployment for any swriting and signed as not permit the restingtion.	ed statements on this tements contained he concerning my previous nd release the compand representative of specified period of tind by an authorized corelease or use of disagraphs.	application shall erein and the refersus employment a any from all liability the company has ne, or to make any many represent bility-related or make any bility-related or make any many represent and many representation and many representat	nedical information in a ma	ed above on they y result any e forego-
hibited by the Ame	ericans with Disab	oilities Act (ADA) and	other relevant fed	deral and state laws."	
ATE	SIG	NATURE			Light
TERVIEWED BY				TE	
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EMARKS					
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DEPARTMENT HEAD

GENERAL MANAGER

APPROVED: 1.\_

EMPLOYMENT MANAGER