

# Employment Application

Stonehouse, Inc.

We are an equal opportunity employer. We comply with all applicable Federal, State and Local laws concerning discrimination in employment. No question in this application is intended to elicit information in violation of any such law nor will any information obtained in response to any question be used in violation of any such law.

**Position(s) applied for:** \_\_\_\_\_ **Application Date:** \_\_\_\_\_

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

LAST FIRST MIDDLE

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

STREET CITY STATE ZIP

**Phone:** \_\_\_\_\_ **Call/Pager/Other:** \_\_\_\_\_ **S.S.#:** \_\_\_\_\_

**If you are under 18, and it is required, can you furnish a work permit?**  Yes  No

**If no, please explain** \_\_\_\_\_

**Have you ever been employed here before?**  Yes  No

**Are you legally eligible for employment in this country?**  Yes  No

**Date available for work:** \_\_\_\_\_

**Type of employment desired:**  Full Time  Part Time  Temporary  Seasonal

**Are you able to meet the attendance requirements for this position?**  Yes  No

**Have you been convicted of a crime within the last seven (7) years?**  Yes  No

**If yes, please explain** \_\_\_\_\_

**Driver's license # if driving is a job function:** \_\_\_\_\_ **State:** \_\_\_\_\_

## Work Experience

List present and former employers beginning with the most recent.

FROM	TO	EMPLOYER	PHONE
JOB TITLE		ADDRESS	
SUPERVISOR AND TITLE		SUMMARIZE THE WORK PERFORMED AND JOB RESPONSIBILITIES	
REASON FOR LEAVING		HOURLY RATE/SALARY	PER
		FINAL \$	<input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year
FROM	TO	EMPLOYER	PHONE
JOB TITLE		ADDRESS	
SUPERVISOR AND TITLE		SUMMARIZE THE WORK PERFORMED AND JOB RESPONSIBILITIES	
REASON FOR LEAVING		HOURLY RATE/SALARY	PER
		FINAL \$	<input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year
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REASON FOR LEAVING		HOURLY RATE/SALARY	PER
		FINAL \$	<input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year
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		FINAL \$	<input type="checkbox"/> Hour <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year