



11420 Okeechobee Boulevard • Royal Palm Beach • Florida 33411
(561) 790-0884 • Fax (561) 790-9378

APPLICATION FOR EMPLOYMENT

Please Print Clearly

Name _____ Date _____

Address _____
Street City State Zip Phone _____

How Long Have You Lived At Above Address? _____ Are You A U.S. Citizen? _____

Previous Address _____ Years Lived Here? _____
Street City State Zip

Date of Birth _____ Sex ☐ F ☐ M Height _____ Ft. _____ In.

Marital Status ☐ Single ☐ Engaged ☐ Married ☐ Separated ☐ Divorced Date of Marriage _____

Number of Dependents Including Yourself _____ Number of Children _____ ☐ Own Home ☐ Rent

Is Spouse Employed? _____ If Yes, Kind of Work? _____

Positions Applied For: 1. _____ Rate of Pay Expected \$ _____ per _____
2. _____ Rate of Pay Expected \$ _____ per _____

Do you want to work ☐ Full Time ☐ Part Time - Specify Days and Hours if Part Time _____

Have You Worked For Us Before? _____ If Yes, When? _____

List any Friends or Relatives Working For Us. _____

If Hired, What Date Will You Be Available To Start Work? _____

Do You Have Any Physical Handicaps Which Would Prevent You From Performing Specific Kinds of Work? _____

If Yes, Explain Your Limitations _____

Have You Had A Serious Illness In The Past 5 Years? ☐ No ☐ Yes (Describe) _____

Have You Received Compensation For Injuries? ☐ No ☐ Yes (Describe) _____

Have You Ever Been Convicted Of A Crime, Excluding Misdemeanors? ☐ No ☐ Yes

If Yes, Describe _____

What Foreign Languages Do You Speak Fluently _____ ☐ Read ☐ Write

Person To Be Notified In Case Of Accident Or Emergency

Name _____ Phone(s) _____

Address _____ Relationship _____

PRIOR WORK HISTORY
(Begin with last, or present employer first)

DATES		NAME AND ADDRESS OF EMPLOYER	SALARY		REASON FOR LEAVING
MONTH AND YEAR	START		ENDING		
From _____					
To _____					
Description of Duties					

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To _____					
Description of Duties					

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MONTH AND YEAR	START		ENDING		
From _____					
To _____					
Description of Duties					

Have You Ever Been Bonded? If Yes, Describe _____

Does Your Present Employer Know Of Your Plans To Change Employment? ☐ Yes ☐ No

May We Contact The Employers Listed Above? ☐ Yes ☐ No If Not, Indicate Below Which One(s) You Do Not Wish Us To Contact. _____

List Educational Background (Schools, Courses and Dates Completed) _____

I authorize investigation of all statements contained in this application and of questions asked at my interview. I understand that if employed, false statements on this application or at my interview shall be sufficient cause for dismissal. I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice.

Date _____ Signature _____