



APPLICATION FOR EMPLOYMENT

EQUAL OPPORTUNITY EMPLOYER

DATE _____		PHONE # _____	
NAME	_____	_____	_____
	Last	First	M.I.
ADDRESS	_____	_____	_____
	NO.	STREET	CITY STATE ZIP
HOME ADDRESS	_____	_____	_____
	NO.	STREET	CITY STATE ZIP
ARE YOU AT LEAST 18 YERS OLD?	_____	SOCIAL SECURITY NUMBER	_____
POSITION APPLIED FOR _____	RATE OF PAY EXPECTED _____		
WOULD YOU WORK: FULL TIME _____	PART TIME _____		
SPECIFY DAYS AND HOURS NOT ABLE TO WORK: _____	_____		
WERE YOU PREVIOUSLY EMPLOYED BY McLANAHAN'S? _____	_____		
IF YES, WHEN AND WHERE _____	_____		
LIST ANY FRIENDS OR RELATIVES WORKING FOR US	_____	_____	_____
	NAME	RELATED	
	_____	_____	_____
	NAME	RELATED	
SUMMARIZE SPECIAL SKILLS & QUALIFICATIONS ACQUIRED FROM OTHER JOBS AND EXPERIENCE _____	_____		

EDUCATION

SCHOOL	NAME & LOCATION	HIGHEST GRADE COMPLETED
SECONDARY	_____	_____
COLLEGE	_____	_____
OTHER	_____	_____

BEGINNING WITH YOU MOST RECENT POSTION, LIST ALL PRESENT AND PAST EMPLOYMENT

1. COMPANY NAME:		EMPLOYED:	NAME OF SUPERVISOR:
		FROM: TO:	
ADDRESS:		RATE OF PAY:	JOB TITLE:
		START: LAST:	DESCRIBE MAJOR FUNCTIONS OF YOUR JOB:
PHONE:	TYPE OF BUSINESS:	REASON FOR LEAVING:	
2. COMPANY NAME:		EMPLOYED:	NAME OF SUPERVISOR:
		FROM: TO:	
ADDRESS:		RATE OF PAY:	JOB TITLE:
		START: LAST:	DESCRIBE MAJOR FUNCTIONS OF YOUR JOB:
PHONE:	TYPE OF BUSINESS:	REASON FOR LEAVING:	
3. COMPANY NAME:		EMPLOYED:	NAME OF SUPERVISOR:
		FROM: TO:	
ADDRESS:		RATE OF PAY:	JOB TITLE:
		START: LAST:	DESCRIBE MAJOR FUNCTIONS OF YOUR JOB:
PHONE:	TYPE OF BUSINESS:	REASON FOR LEAVING:	
4. COMPANY NAME:		EMPLOYED:	NAME OF SUPERVISOR:
		FROM: TO:	
ADDRESS:		RATE OF PAY:	JOB TITLE:
		START: LAST:	DESCRIBE MAJOR FUNCTIONS OF YOUR JOB:
PHONE:	TYPE OF BUSINESS:	REASON FOR LEAVING:	

MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? _____

IF NOT, INDICATE BY NUMBER WHICH ONES(S) YOU DO NOT WISH US TO CONTACT: _____

THE FACTS SET FORTH ABOVE IN MY APPLICATION ARE TRUE AND COMPLETE. I UNDERSTAND THAT, IF EMPLOYEED, FALSE STATEMENTS ON THIS APPLICATION SHALL BE CONSIDERED SUFFICIENT CAUSE FOR DISMISSAL.

THIS APPLICATION OF EMPLOYMENT IS NOT INTENDED TO BE A CONTRACT OF EMPLOYMENT

SIGNATURE OF APPLICANT

DATE

INTERVIEWER

DATE