

# ZORESCO EQUIPMENT COMPANY

## Employment Application



### APPLICANT INFORMATION—PLEASE PRINT ALL INFORMATION

Last Name		First	M.I.	Date
Street Address			Apartment/Unit #	
City		State	ZIP	
Phone		E-mail Address		
Date Available				Desired Salary
Position Applied for			Are you 18 years of age or older? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Who referred you?				
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	
Do you have a clean driving record for the past five years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, explain	
<i>Will not necessarily exclude you from consideration.</i>				

### EDUCATION

High School	Address	
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	
College	Address	
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	
Other	Address	
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree	

### REFERENCES

*Please list three professional references.*

Full Name	Relationship
Company	Phone (    )
Address	
Full Name	Relationship
Company	Phone (    )
Address	
Full Name	Relationship
Company	Phone (    )
Address	

**PAGE TWO-EMPLOYMENT APPLICATION -- ZOESCO EQUIPMENT COMPANY**

**PREVIOUS EMPLOYMENT**

Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

**MILITARY SERVICE**

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my dismissal for willful misconduct resulting from misleading the employer during the application process.

Signature	Date
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**DRUG-FREE WORKPLACE --- EQUAL OPPORTUNITY EMPLOYER**