

Labor Wise, Inc.

P.O Box 58
Desert Hot Springs, CA 92240
laborwiseinc@gmail.com



Employment Application

Personal

Today's Date _____

How do we contact you		
Last Name	First Name	Middle Name
Complete Address		
Home Phone Number	Mobile Phone Number	
Social Security Number	Driver License # & State	

Are you a U.S. Citizen or are you legally authorized to work in the U.S.?	___ YES	___ NO
Do you have any relatives working in this agency?	___ YES	___ NO
Who?		
Have you been convicted of a felony within the last 7 years? If yes, explain.	___ YES	___ NO

Education

High School							
Name/Location of School				Received ___ Diploma ___ Other specify _____ ___ None			
College, University or Professional School:							
Name of School	Location	Dates of attendance		Credit hours earned		Major/Minor Course of Study	Type of Degree earned
		From	To	Qtr	Sem		

Employment Desired

Are you seeking for: _____ Full Time _____ Part Time _____ Temporary or Summer employment?	
Which Position you are applying for	
Date Available to Start	Salary Desired
Have you ever applied to our company before? If yes, give date.	
Have you ever been employed with us before? If yes, give date.	
Are you currently employed?	

Capability/Reliability

Would you be able to perform all the tasks required by the job you are applying for? ___ YES ___ NO
If not, explain which tasks:
Have you filed any type of fraudulent claim against any of your present or past employers? ___ YES ___ NO
If so, explain:
How many days of work have you missed in the last two years?
How many days have you been late to work in the past two years?
Would you be able to report to work on time every day on a regular and consistent basis? ___ YES ___ NO
If no, please explain

Knowledge/Skills/Abilities you possess and believe relevant to the position you seek.

References

References – give below the names of three persons no related to you, whom you know at least one year			
NAME	RELATIONSHIP	PHONE NUMBER	YEARS ACQUAINTED

Employment History

Employer Name	Phone:
Address	Job Title
Supervisor Name	Hourly Rate
Dates Employed From: To:	Hours per week:
Duties and responsibilities:	
Reason for leaving:	

Employer Name	Phone:
Address	Job Title
Supervisor Name	Hourly Rate
Dates Employed From: To:	Hours per week:
Duties and responsibilities:	
Reason for leaving:	

Employer Name	Phone:
Address	Job Title
Supervisor Name	Hourly Rate
Dates Employed From: To:	Hours per week:
Duties and responsibilities:	
Reason for leaving:	

Employer Name	Phone:
Address	Job Title

Supervisor Name	Hourly Rate
Dates Employed From: _____ To: _____	Hours per week:
Duties and responsibilities:	
Reason for leaving:	

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, misleading or otherwise incorrect statements made on this application form or during any interview maybe grounds for my immediate discharge. I hereby authorized the Company to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and compere consent to their revealing any and all information they wish as a result of this investigation. In addition I hereby waive my right to bring any cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements. I agree that, if I am employed, I will abide by all the rules and regulations of the company. I understand that the taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination, I understand that my employment is "at-will" and may be terminates by myself or by the company at any time for any reason at all, with or without prior notice.

Signature_____ Date_____

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COMPANY USE ONLY

Interview by:	Hire: ___YES ___NO	Rate:
Remarks:		