APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE EQUAL OPPORTUNITY EMPLOYER

NAME (LAST NAME FIF							
	RST)			SOCIAL	SECURITY NO.		
PRESENT ADDRESS		CITY		STATE		ZIP CODE	
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Adams 9661 (CONTINUED ON OTHER SIDE)

Application for Employment

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REFERENCES

GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

	NAME	ADDRESS	BUSINESS	YEARS KNOWN
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2	and the second	arata	(41E)} (41E)	DA TABESHI
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AUTHORIZATION

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE."

DATE_ SIGNATURE INTERVIEWED BY_ DATE DO NOT WRITE BELOW THIS LINE REMARKS **NEATNESS** CHARACTER PERSONALITY ABILITY WILL FOR DEPT. HIRED POSITION SALARY WAGES **EMPLOYMENT MANAGER** DEPT. HEAD GENERAL MANAGER

THIS APPLICATION FOR EMPLOYMENT IS SOLD ONLY FOR GENERAL USE THROUGHOUT THE UNITED STATES. ADAMS ASSUMES NO RESPONSIBILITY AND HEREBY DISCLAIMS ANY LIABILITY FOR THE INCLUSION IN THIS FORM OF ANY QUESTIONS OR REQUESTS FOR INFORMATION UPON WHICH A VIOLATION OF LOCAL, STATE AND/OR FEDERAL LAW MAY BE BASED. IT IS THE USER'S RESPONSIBILITY TO ENSURE THAT THIS FORM'S USE COMPLIES WITH APPLICABLE LAWS, WHICH CHANGE FROM TIME TO TIME.

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