



# APPLICATION FOR EMPLOYMENT

(PLEASE PRINT PLAINLY)

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of most States also prohibit some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status or physical or mental handicap or disability.

**CREATIVE ENGINEERING, INC.**

DATE

## PERSONAL INFORMATION

<input type="checkbox"/> Miss <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr.	NAME	Last	First	Middle	AGE	SEX
PRESENT ADDRESS		Street	City	State	Zip	
PERMANENT ADDRESS		Street	City	State	Zip	
PHONE No.	OWN HOME	RENT	BOARD	HOW LONG HERE	SOCIAL SECURITY No.	
DATE OF BIRTH	HEIGHT	WEIGHT	HAIR	EYES	Married	Single
					Engaged	Widowed
					Divorced	Separated
NAME OF SPOUSE			PLACE OF EMPLOYMENT			
No. OF CHILDREN	AGES	SEX	Dependents Other Than Wife Or Children		CITIZEN OF U.S.A.	
					<input type="checkbox"/> YES	<input type="checkbox"/> NO
If Related To Anyone In Our Employ, State Name, Dept. and Relationship					REFERRED BY	
HAVE YOU EVER BEEN CONVICTED OF A CRIME, EXCLUDING MISDEMEANORS?		<input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, DESCRIBE IN FULL			

DO YOU OWN A CAR? <input type="checkbox"/> YES <input type="checkbox"/> NO	MODEL	YEAR	COLOR
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## EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	If, So May We Inquire Of Your Present Employer? <input type="checkbox"/> YES <input type="checkbox"/> NO	Ever Applied To This Company Before? <input type="checkbox"/> YES <input type="checkbox"/> NO

## EDUCATION

Name and Location of School	No. of Years Completed	Did You Graduate?	Subjects Studies and Degree(s) Received
GRAMMAR		<input type="checkbox"/> YES <input type="checkbox"/> NO	
HIGH SCHOOL	1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE	1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
Trade, Business or Correspondence School	1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	

SPECIAL SKILLS OR SUBJECTS OF STUDY (Specific)

U.S. MILITARY OR NAVAL SERVICE RANK

PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES

ACTIVITIES OTHER THAN RELIGIOUS (Civic, Athletic, Fraternal etc.)

Exclude organizations, the name or character of which indicates the race, creed, color or national origin of its members.

## PREVIOUS EMPLOYMENT HISTORY

*BEGIN WITH PRESENT OR MOST RECENT EMPLOYER AND ACCOUNT FOR ALL PERIODS OF UNEMPLOYMENT.*

NAME AND ADDRESS OF COMPANY	FROM		TO		POSITION TITLE	Base Salary — Start
	Mo.	Yr.	Mo.	Yr.		\$ _____
					SUPERVISOR	Base Salary — Final
					TELEPHONE No. AND AREA CODE	\$ _____

TYPE OF BUSINESS OR PRODUCT LINE

BRIEF DESCRIPTION OF YOUR DUTIES

REASON FOR LEAVING

NAME AND ADDRESS OF COMPANY	FROM		TO		POSITION TITLE	Base Salary — Start
	Mo.	Yr.	Mo.	Yr.		\$ _____
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TYPE OF BUSINESS OR PRODUCT LINE

BRIEF DESCRIPTION OF YOUR DUTIES

REASON FOR LEAVING

## REFERENCES

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

<b>1</b>	NAME	BUSINESS	
	ADDRESS		YEARS ACQUAINTED
<b>2</b>	NAME	BUSINESS	
	ADDRESS		YEARS ACQUAINTED
<b>3</b>	NAME	BUSINESS	
	ADDRESS		YEARS ACQUAINTED

## PHYSICAL RECORD

LIST ANY PHYSICAL DEFECTS

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PRESENT HEALTH	APPROXIMATE DAYS ILL PAST 2 YEARS?	HAVE YOU ANY DEFECTS IN HEARING? <input type="checkbox"/> YES <input type="checkbox"/> NO	IN VISION? YES    NO	IN SPEECH? <input type="checkbox"/> YES <input type="checkbox"/> NO
HAVE YOU EVER HAD A JOB-CONNECTED DISEASE OR INJURY? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YES, DID YOU RECEIVE COMPENSATION?	MEDICAL BENEFITS?	HOW LONG?
In Case Of Emergency Notify →	NAME	ADDRESS	PHONE	

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, 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 ANY PREVIOUS NOTICE.

DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

## DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY		DATE		
REMARKS				
NEATNESS		CHARACTER		
PERSONALITY		ABILITY		
HIRED	FOR DEPT.	POSITION	WILL REPORT	SALARY HOURLY RATE

# CREATIVE ENGINEERING INC. EMPLOYEE APPLICATION

Date of Origin: 1970s/1980s

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Submission by VegaNova

Version 1.0

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