APPLICATION FOR EMPLOYMENT

Pre-Employment Questionnaire

PERSONAL INFORMATION			Date						
Name	Last F	First	Middle	_Social Security #					
Address									
	Street		City	State	Zip				
Phone (Are you 18 years or older? □Yes □No Are you eligible to work in the United States? □Yes □No								
completely. T	on will become a permanent p This application is active 90 day mployer may terminate the emp	s from date	of completion. Em	ployment with this co					
The Blue Gras	ss Council, BSA is an equal opp	ortunity em	ployer.						
FORMER EMI	PLOYERS - List last four employ	ers, starting	with most recent fir	rst.					
Date Month/Year	Name / Address / Phone # Of Former Employer	Salary	Position	Supervisor	Reason for Leaving				
From									
То									
From									
То									
From									
То									
From									
То									
	ENT DESIRED a are applying for:								
Date you are	e available to start:								
Salary / Wa	ge desired:								
•	ployed now? \Box Yes \Box Nye inquire of your present \Box		? □Yes □No						
How were y	ou referred to this compar	ny? (New	spaper, friend, ag	gency, other)	_				

Continued on Reverse Side

AVAILABILITY

To help us consider you for a job th	at matches your availability,	please indicate all days and hours	your
normal working hours can include.	You must answer all question	ons to be considered for employme	ent.

I am applying for: I am available:		☐ Full Time ☐ Part Time								
Weekdays		☐ Yes	☐ Yes ☐ No Specific Days / Times							
Saturdays		□ Yes			Specific Days / Times					
Sundays		□ Yes								
•		□ Yes								
Holidays		□ Yes								
		y of the above, please explain why normal working hours cannot includ					ours cannot include			
each of these times:										
	Name and Location of School		Years G		luated		C 25			
EDUCATION			Attended	No	Yes	Cou	rse/Major			
High School										
College										
Trade, Business School										
REFERENCES	Give the nar	nes of thre	ee personal i	referen	ces not i	related to you.	,			
Name		Address/City /State			e	Phone	Relation to you			
1										
2										
3										
if employed, falsi: I authorize investinformation concerelease all parties I understand that definite period an notice.	fied statements tigation of all erning any prev from all liabilit this is not a c d may, regardle	on this appl statements rious employ ty for any da ontract for e ess of the da	ication shall be contained he with and any amage that may employment. te of payment	rein and pertinent y result: I unders of wage	ds for disr I the refe at information from furnistand and es and sala	missal. erences listed above ation they may have ishing same to you. agree that, if hired ary, be terminated at	wledge and understand that, e to give you any and all personal or otherwise, and my employment is for no any time without any prior			
			OFFIC	E USE (ONLY					
Job Title: Start Date:										
Pay Rate:										