

## Dock Central An Equal Opportunity Employer

## **Employment Application**

Applicant Information							
Full Name:	Last	First			M.I.	Date:	
Address:							
	Street Address					Apartment/Unit #	
	City				State	ZIP Code	
Phone:			Email				
Date Availal	ate Available: Social Security No.: Desired Salary:						
Position App	olied for:						
YES NO YES NO Are you a citizen of the United States?     YES NO							_
Have you ev	ver worked for this compa	YES NO	If yes, w	/hen?_			
YES NO Have you ever been convicted of a felony?							
If yes, explain:							
Education							
High Schoo	l:	Address:					
From:	To:	Did you graduate?	YES	NO	Diploma::		
College:		Address:					
From:	To:	Did you graduate?	YES	NO	Degree:		
Other:		Address:					
From:	To:	Did you graduate?	YES	NO	Degree:		

References								
Please list three	professional references.							
Full Name:		Relationship:						
0			Phone:					
Address:								
				Relationship:				
0				Phone:				
Address:								
Full Name:				Palationshin:				
Company				Relationship:Phone:				
<u></u>								
	Previous E							
Company:				Phone:				
Job Title:	Starting S	alary: <u>\$</u>		Ending Salary:				
Responsibilities:								
From:	To:	Reason fo	or Leaving:					
	our previous supervisor for a reference?	YES	NO					
Company:				Phone:				
Address:				Supervisor:				
Job Title:	Starting S	alary: <u>\$</u>		Ending Salary:				
Responsibilities:								
From:	To:	Reason fo	or Leaving:					
May we contact y	your previous supervisor for a reference?	YES	NO					
Company:				Phone:				
Address:				Supervisor:				

Job Title:	Starting Salary:		Ending Salary: <u>\$</u>				
Responsibilities:							
From: To:	Reason for	r Leaving:					
May we contact your previous supervisor for a re	YES eference?	NO					
Military Service							
Branch:		From:	To:				
Rank at Discharge:	Type of [	Type of Discharge:					
If other than honorable, explain:							
Disclaimer and Signature							
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.							
Signature:		Date:					

With my signature above (typed or written), I certify that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. I authorize all former employers to release job-related information they may have about me and I release all persons or companies from any liability or responsibility for providing such information.