APPLICATION FOR EMPLOYMENT

* *	*	ons without regard to race or legally protected status.	0	_		0 0	isability,	
	,	0 7 1			, , ,			
Position(s) Applied	for:				Date:			
How did you learn a	about us?				,			
Advertisen	ment Friend Inquiry							
Employme	nt Agency Relative Other:							
Last Name:		First Name:		Middle	Name:			
Address:	City: State:			Zip:				
Phone Number(s): Social Security Number:								
Best time to contact you at home is:: am pm								
If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes							No	
Have you ever filed an application with us before? If yes, give date:						Yes	No	
Have you ever been employed with us before? If yes, give date:						Yes	No	
Do any of your friends or relatives, other than spouse, work here? If yes, state name, relationship and location:						Yes	No	
Are you currently employed?							No	
May we contact your present employer?							No	
Are you prevented form lawfully becoming employed in this country because of Visa or Immigration Status? Proof of citizenship or immigration status will be required upon employment.							No	
Date available for w	ork /	/ What is	your desired salary ran	ge?				
Are you available to work: Full Time (please indicate 1 2 3 shift) Part Time (please indicate Mornings Afternoon Evenings) Temporary (please indicate dates available / /)								
Are you currently on "lay-off" status and subject to recall?							No	
Can you travel if a job requires it?							No	
Education								
School	Name & A	Address of School	Course of Stud	y	Years Completed	Diploma/Degree		
High School								
Undergraduate College								
Graduate/ Professional								
Other (Specify)								
	<u> </u>							



PO Box 891 + 517 Beaser Avenue + Ashland, WI 54806 + 715.682.1160 + f:715.682.6101 + phadministration@centurytel.net

Work Experience					
Start with your present or last job. Indexclude organizations which indicate					signments and volunteer activities. You may rigin, disabilities or protected status.
Employer:			Dates E	mployed	Work Performed
Address:			From	То	
Starting/Present Job Title:					
Supervisor			Hourly R	ate/Salary	
Reason for Leaving			Starting	Final	
May We Contact?	Yes	No			
Employer:			Dates E	mployed	Work Performed
Address:			From	То	
Starting/Present Job Title:					
Supervisor			Hourly R	ate/Salary	
Reason for Leaving			Starting	Final	
May We Contact?	Yes	No			
Employer:			Dates E	mployed	Work Performed
Address:			From	То	
Starting/Present Job Title:					
Supervisor			Hourly R	ate/Salary	
Reason for Leaving			Starting	Final	
May We Contact?	Yes	No			
Employer:			Dates E	mployed	Work Performed
Address:			From	То	
Starting/Present Job Title:					
Supervisor			Hourly R	ate/Salary	
Reason for Leaving			Starting	Final	
May We Contact?	Yes	No			
Employer:			Dates E	mployed	Work Performed
Address:			From	То	
Starting/Present Job Title:					
Supervisor		Hourly Rate/Salary			
Reason for Leaving			Starting	Final	
May We Contact?	Yes	No			
Comments: Include explanation of any gaps	in emplo	oyment.			

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

PO Box 891 + 517 Beaser Avenue + Ashland, WI 54806 + 715.682.1160 + f:715.682.6101 + phadministration@centurytel.net

Describe any job-related	training received in the	e United States military	:			
List professional, trade, l You may exclude membership w			ancestry, disability or other prote	cted status:		
	Ü					
Other Qualifications Sa	ummarize special job-related sk	eills and qualifications acquired	l from employment or other expe	ience.		
Specialized Skills (Skills)	Equipment Operated)		Production/I		Other (list)	
Terminal	Spreadsheet		Machinery	(list)		
PC/Mac	Word Processing					
WPM	WPM					
State any additional info	rmation you feel may l	oe helpful to us in consi	dering your application.			
NT A 1º D	1.	. 1 1 1		• • •	C.1 • 1 C 1 • 1	
applying.	not answer this quest	tion unless you have be	een informed about the	requirements of	f the job for which you are	
Are you capable of perfo	2				ties involved in the job or occupa- Yes No	
Personal/Professional	References Do not inclu	ıde family members or past sup	ervisors.			
Name	me Phone Numbers		Best Time to Call	Occupation		
1.						
2.						
3.						

Applicant's Statement

I certify that answers given herein are true and complete.

I authorized investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization

mange is specifically acknowledged in writing by an author	nized executive of this organization.		
n the event of employment, I understand that false or misl derstand, also, that I am required to abide by all rules and r		ication or interview(s) may result in discha	ırge. I un-
CA 1:	D	<u> </u>	
Signature of Applicant	Date		