

New Image Tanning

Application for Employment

Date: _____

Location: 313 W Main St
Monticello, IL 61856

701 S Sixth St
Champaign, IL 61820

502 E John St
Champaign, IL 61820

Personal Information

Name _____

Present Address _____

Permanent Address _____

Phone # _____ E-mail _____

If you are under 18 and we require a work permit, can you furnish one? yes no

If no, please explain _____

Have you ever worked for this company? yes no Yes? When? _____

Are you a citizen of the United States? yes no

No? Are you legally allowed to work in the united states? yes no

Type of employment desired full time part time seasonal

Who referred you to us? _____

Have you ever pled "guilty," "no contest," or been convicted of a crime? yes no

If yes, give dates and details _____

Answering yes to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.

Education

High School _____ Address _____

yrs completed _____ Did you graduate yes no

Subjects studied _____

College/University _____ Address _____

yrs completed _____ Did you graduate yes no Degree _____

Major _____

Other _____ Address _____

yrs completed _____ Did you graduate yes no Degree _____

Major _____

Hours of Availability

Please specify how many hours per week you wish to work _____

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

References

Name _____ Ph. # _____

Address _____ City _____ State _____ Zip _____

Name _____ Ph # _____

Address _____ City _____ State _____ Zip _____

Summarize your special skills or qualifications

Previous Employment (begin with most recent position)

Dates of employment from / / to / / Position held _____

Company _____ Address _____

Ph # () Supervisor _____ Title _____

Responsibilities _____

Starting salary and title _____ Ending salary and title _____

Reason for leaving _____ May we contact employer [] yes [] no

Dates of employment from / / to / / Position held _____

Company _____ Address _____

Ph # () Supervisor _____ Title _____

Responsibilities _____

Starting salary and title _____ Ending salary and title _____

Reason for leaving _____ May we contact employer [] yes [] no

Dates of employment from / / to / / Position held _____

Company _____ Address _____

Ph # () Supervisor _____ Title _____

Responsibilities _____

Starting salary and title _____ Ending salary and title _____

Reason for leaving _____ May we contact employer [] yes [] no

Signature of applicant _____ Date _____

Please attach a copy of your class schedule if applicable.