

Application for Employment

JP SERVICES INC.

3070 Hood Road
Medina, Ohio 44256
330-722-5604 Office
330-722-9661 Fax

Applicant's Information

First Name _____

Last Name _____

Nickname _____

Social Security Number

_____ - _____ - _____

Date of Birth

Driver License Number

Address _____

Email

Phone Number

_____ - _____ - _____

Work

Cell

Other

Recruitment Information

Position Applying For

Available to Work Full-time Part-time

Or Specify Shift Preferences 1st Shift 2nd Shift 3rd Shift

Other(s) _____

What days and hours are you available to work?

- Mondays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Tuesdays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Wednesdays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Thursdays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Fridays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Saturdays from _____ am / pm (circle one) to _____ am / pm (circle one)
- Sundays from _____ am / pm (circle one) to _____ am / pm (circle one)

How did you learn about this company and position?

- Job advertisement (identify publication or other media): _____
- Employee referral (identify employee): _____
- Other (please specify): _____

Have you previously worked at our company? Yes No

If yes, under what conditions did you leave employment before? _____

Education

For each level of schooling below, please write the school name, the city and state where it is located, your major and minor subjects, and the degree or diploma you received.

High School _____

College 1 _____

College 2 _____

Graduate School _____

Business, Trade, or Other Schools _____

Work History

Starting with your current or most recent employer, please provide the following information about the last three companies for which you have worked.

Employer 1 (current or most recent)

Company Name _____

Address _____

Dates Employed _____

Job Title(s) Held _____

Job Responsibilities _____

Name of Immediate Supervisor(s) _____

Employer 2

Company Name _____

Address _____

Dates Employed _____

Job Title(s) Held _____

Job Responsibilities _____

Name of Immediate Supervisor(s) _____

Employer 3

Company Name _____

Address _____

Dates Employed _____

Job Title(s) Held _____

Job Responsibilities _____

Name of Immediate Supervisor(s) _____

Applicant Consent

Please carefully read the statements below and initial each one to indicate that you understand and agree to the terms stated. Then sign this form at the bottom.

_____ I certify that all information I have supplied on this form is correct to the best of my knowledge. I understand that omissions or providing deliberate misinformation will disqualify my application and, if hired, would serve as grounds for dismissal.

_____ I give consent to **JP SERVICES INC.** to contact the employers listed on this form for my employment references. I authorize these individuals to provide truthful information regarding my employment and previous work experience. In doing so, I waive liability against the employers and individuals contacted as my references, provided the information they supply is honest, factual and given without malice.

Applicant's Signature _____ **Date** _____

Company Purposes Only

Interviewer's Signature _____ **Date** _____