

# QUINN FLAGS

## APPLICATION FOR EMPLOYMENT (An Equal Opportunity Employer)

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**PERSONAL INFORMATION**

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First MiddleAddress: \_\_\_\_\_  
Street City State Zip CodeContact Information: (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
Home Telephone Mobile/Cell

Email: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Are you a U.S. Citizen? \_\_\_\_\_

Are you 18 years or older? \_\_\_\_\_

Have you ever been convicted or pled guilty to a misdemeanor or felony? \_\_\_\_\_

Have you ever applied for this company before? \_\_\_\_\_

How did you learn about our company? \_\_\_\_\_

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**DESIRED POSITION:**

Position you are applying for? \_\_\_\_\_

Available Start Date: \_\_\_\_\_

Desired Salary: \_\_\_\_\_

Are you currently employed? \_\_\_\_\_

If so may we inquire of your present employer? \_\_\_\_\_

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Are there any reasons for which you might not be able to perform the job duties (with a reasonable accommodation)?  Yes  No If yes, please explain

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## **EDUCATION**

Name and Location of School –Number of Years Attended / Did you Graduate?

<b>High School</b>			
<b>College or University</b>			
<b>Specialized Training, Trade School, etc...</b>			
<b>Other Education</b>			

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Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position.

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**FORMER EMPLOYERS** (List below last four employers, starting with last one first).

Employer: _____	Dates Employed: _____	
Work Phone: _____	Pay Rate: _____	
Address: _____		
City: _____	State: _____	Zip Code: _____
Position & Duties: _____		
Supervisor's Name & Title: _____		
Reason for Leaving: _____		
May we contact this employer? _____		
If No Why? _____		

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**We may contact the employer's listed above unless you indicate those you do not want us to contact.**

Which of these jobs did you like the most? \_\_\_\_\_

What did you like most about this job? \_\_\_\_\_

\_\_\_\_\_

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Please list three professional references who can evaluate your work performance. Do not include friends or relatives.

## REFERENCES:

Name	Title	Company	Phone

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“I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.” In consideration of my employment, I agree to conform to the company's rules and regulation, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its President, and then only when in writing and signed by the President has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.”

Date: \_\_\_\_\_ Signature: \_\_\_\_\_