

107 S. Railroad St, Eagle River, WI, 54521 715-771-0141 info@eagleriverart.com

APPLICATION FOR EMPLOYMENT

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE		Today's Date		
NameLast				
Last		First	Midd	le
Present address				
City		State	Zip	
How long		Social Security No		
Home phone	Cell phone_		Email	
Position desiredHow many hours can you work week				
Employment desired Full-t	ime only	Part-time o	only	_ Full- or part-time
When available for work?				
Do you have a driver's license?	No	Yes		
Driver's license number		State of issue		
Expiration date				
Have you had any accidents during t	he past three ye	ears?	How many? _	

Have you had any moving violations during the past three years? _____ How many? _____

EDUCATION

School and Location	Course or Major	# of Yrs Completed	Degree(s)
High School			
College			
Bus. or Trade			
Graduate Study			
Other			
Current Licenses and/or Certificates			
An application form sometimes makes it diffinance background. Use the space below to summar qualifications for the specific position for wh	rize any additional info	to adequately summarize a	

EMPLOYMENT HISTORY

Please list your employment history for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Employer Name			
Address			
Phone Number			
Employment dates: From	To	Salary: Start	Final
Reason for leaving			
List the jobs you held, duties perfeat this company.			
Employer Name			
Address			
Phone Number			
Employment dates: From	To	Salary: Start	Final
Reason for leaving			
List the jobs you held, duties perfeat this company.	formed, skills used	or learned, advancements or	promotions while you worked

EMPLOYMENT HISTORY (Continued)

Employer Name			
Address			
Phone Number			
Employment dates: From	To	Salary: Start	Final
Reason for leaving			
List the jobs you held, duties perfat this company.		d or learned, advancements or	
Employer Name			
Address			
Phone Number		Supervisor's Name	
Employment dates: From	То	Salary: Start	Final
Reason for leaving			
List the jobs you held, duties perfat this company.	formed, skills used	d or learned, advancements or	promotions while you worked
Mav we contact vour present emi	olover?	Yes No	

REFERENCES

Please list 2 - 3 references other than relatives or previous employers.

Name			
Position			
Company			
Address			
Telephone			
Name			
Position			
Company			
Address			
Telephone			
Name			
Position			
Company			
Address			
Telephone			
Have you ever been in the armed forces?	MILITARYYes	No	Branch
Specialty	Date Entered		Discharge Date