



& CUSTOM IMPRINTED SPORTSWEAR

YORKVILLE
135 E VETERANS PARKWAY
630-553-7775

PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

OFFICE USE ONLY

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

Name _____

Date: _____

Address _____

How Long at Current Address _____

U.S. Citizen ____ YES ____ NO

Telephone _____

If under 18, please list age _____

Have you ever been convicted of a crime? ____ No ____ Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type of rehabilitation. _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Professional or Trade School				

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REFERENCES

Please list two references other than relatives or previous employers

Name _____

Name _____

Address _____

Address _____

Telephone () _____

Telephone () _____

Years Known _____

Years Known _____

Relationship _____

Relationship _____

WORK EXPERIENCE

Please list your work experience for the **past five years** beginning with your most recent job held.
Attach additional sheets if necessary **OR** Attach Resume

Employer Name	Name of Last Supervisor	Employment Dates	Pay or Salary
Address		From	Start
City, State, Zip		To	Final
Phone	Your Last Job Title		

Reason for Leaving
(Please be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use this space to summarize any additional information necessary to describe your full qualifications for the specific position you are applying.

May we contact your present employer? _____ Yes _____ No

Days/Hours available to work: _____

Date available to start work: _____

Did you complete this application yourself _____ Yes _____ No

If not, who did? _____

Signature _____

Date _____