

**Aaron's Semi Repair, Inc.
426 US Hwy 191**

COMPANY NAME: Rock Springs, WY 82901
Employment Application

APPLICANT INFORMATION			
Last Name		First	M.I. Date
Street Address			Apartment/Unit #
City		State	ZIP
Phone		E-mail Address	
Date Available	Social Security No.		Desired Salary
Position Applied for			
Are you a citizen of the United States?	YES <input type="radio"/>	NO <input type="radio"/>	If no, are you authorized to work in the U.S.? YES <input type="radio"/> NO <input type="radio"/>
Have you ever worked for this company?	YES <input type="radio"/>	NO <input type="radio"/>	If so, when?
Have you ever been convicted of a felony?	YES <input checked="" type="radio"/>	NO <input type="radio"/>	If yes, explain

EDUCATION					
High School		Address			
From	To	Did you graduate?	YES <input type="radio"/>	NO <input type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input checked="" type="radio"/>	NO <input type="radio"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input checked="" type="radio"/> NO <input checked="" type="radio"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input checked="" type="radio"/> NO <input checked="" type="radio"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date