Application for Employment PRE-EMPLOYMENT QUESTIONNAIRE EQUAL OPPORTUNITY EMPLOYER

Personal Information			D	ATE				
NAME (LAST NAME FIRST)				SOCIAL SECURITY NO.				
DDECENT ADDDECC		CITY		STATE	No. Habitation	ZIP CODE		
PRESENT ADDRESS		GITY		01/11	SINIE		Zii OODL	
PERMANENT ADDRESS		CITY		STATE	STATE			
PHONE NO.	PHONE NO.		REFERRED BY					
Employment Desired								
POSITION				SALARY DESIRED				
ARE YOU EMPLOYED NOW? YES	NO	IF SO, MAY WE IN	NQUIRE OF YO	OUR PRESE	ENT EMPLOYER?	YES	NO	
EVER APPLIED TO	WHERE				WHEN			
THIS COMPANY BEFORE? YES	NO							
Education History								
	LOCATION OF S	CHOOL	YEARS ATTENDED	DID YOU GRADUATE	SL	JBJECTS STUDIED	D -	
HIGH SCHOOL								
COLLEGE	and the second s						ž	
TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL								
General Information								
SUBJECT OF SPECIAL STUDY/RESEARCH WORK								
SPECIAL TRAINING								
SPECIAL SKILLS	-							
U.S. MILITARY OR NAVAL SERVICE			RAN	1K				
Former Employers (LIST BELOW LA DATE MONTH AND YEAR NAME &	ST FOUR EMPLO ADDRESS OF EI		SALARY	<i>⊪ POSITIO</i> POSITIO	CONTRACT CAR CASE OF STREET	ASON FOR LEAVIN	IG	
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NAM		ADDRE	ED TO YOU, WHOM YOU HAVE KNO SS	BUSINESS	YEARS KNOWN
	However, and the second				
Authorization					
I certify that the facts alsified statements or	contained in this a this application s	application are true and cor hall be grounds for dismiss	nplete to the best of my knowle al.	edge and understand that, if er	nployed
ormation concerning	my previous emp	ts contained herein and th loyment and any pertinent e that may result from utiliz	information they may have, p	isted above to give you any a personal or otherwise, and rele	nd all in ease the
also understand and specified period of time representative.	agree that no repr e, or to make any	esentative of the company agreement contrary to the	has any authority to enter into foregoing, unless it is in writing	any agreement for employmer and signed by an authorized o	nt for any company
Disabilities Act (ADA)	and other relevant	t federal and state laws.		anner prohibited by the Americ	
equired, I understand eports and will also d	d that, in complian obtain a separate	ce with federal law, the cor	npany will provide me with a w me to consent to these report	to my employment. If such reprinten notice regarding the use ts. I also understand that a po	of these
n compliance with ted plete the required emp	leral law, all perso ployment eligibility	ons hired will be required to verification document form	n verify identity and eligibility to a upon hire.	work in the United States and) to com
DATE		SIGNATURE			
		Do Not Write I	Below This Line		
DATE		INTERVIEWED BY	6		
Remarks					

NEATNESS	ARE TO THE THE PROPERTY OF THE		CHARACTER	Company of the Compan	
PERSONALITY			ABILITY		
HIRED	FOR DEPT.	POSITION	WILL	SALARY	

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DEPARTMENT HEAD

GENERAL MANAGER

APPROVED:

EMPLOYMENT MANAGER