



The Original Chicken Box | Employment Application

PLEASE TELL US ABOUT YOURSELF

Full Name: Last _____ First _____ M.I. _____ Date _____

Address: Street Address _____

Apt / Unit # _____ City _____ State _____ Zip Code _____

Phone _____ Email _____

Date Available: _____ Social Security No: _____ Desired Salary _____

Position Applying for: _____

Are you a citizen of the United States?

YES

NO

If no, are you authorized to work in the U.S.?

YES

NO

Have you ever worked for this company?

YES

NO

If yes, when? _____

Have you ever been convicted of a felony?

YES

NO

If yes, please provide a detailed explanation below.

EDUCATION LEVEL

High School: _____ Address: _____

From: _____ To: _____	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Diploma: _____
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College: _____ Address: _____

From: _____ To: _____	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree: _____
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Other: _____ Address: _____

From: _____ To: _____	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree: _____
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REFERENCES | *Please list three professional references*

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

WORK HISTORY

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"/>	Phone: _____
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Company: _____ Supervisor: _____

Address: _____

City: _____ State: _____ Zip Code: _____

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"/>	Phone: _____
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Company: _____ Supervisor: _____

Address: _____

City: _____ State: _____ Zip Code: _____

MILITARY

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, please explain: _____

***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: _____