

FAROUDJA TONER

APPLICATION FOR EMPLOYMENT PRE-EMPLOYMENT QUESTIONNAIRE – AN EQUAL OPPORTUNITY EMPLOYER

DATE _____

PERSONAL INFORMATION
 NAME (LAST NAME FIRST) _____ SOCIAL SECURITY NO. _____

PRESENT ADDRESS _____ CITY _____ STATE _____ ZIP _____

PERMANENT ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE NO. (____) _____ REFERRED BY _____

EMPLOYMENT DESIRED

POSITION _____ DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU EMPLOYED? YES NO IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? YES NO

EVER APPLIED TO THIS COMPANY BEFORE? YES NO WHERE? _____ WHEN? _____

PHONE NO. (____) _____ REFERRED BY _____

SCHOOL NAME & LOCATION

GRAMMAR SCHOOL _____ YRS _____ GRADUATE? _____ MAJOR _____

HIGH SCHOOL _____ YRS _____ GRADUATE? _____ MAJOR _____

COLLEGE _____ YRS _____ GRADUATE? _____ MAJOR _____

TRADE SCHOOL _____ YRS _____ GRADUATE? _____ MAJOR _____

SUBJECTS OF SPECIAL STUDY, RESEARCH WORK, OR SPECIAL TRAINING SKILLS _____

U.S. MILITARY OR
 NAVAL SERVICE _____ RANK _____

EMPLOYMENT HISTORY
 (List last four employers below, beginning with the most recent.)

DATES	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM / TO /				
FROM / TO /				
FROM / TO /				
FROM / TO /				