

Glasses 2 Day @ Citrus Vision

2332 Hwy 44 W

Inverness, FL 34453

info@citrusvision.com

APPLICATION FOR EMPLOYMENT

Please Print Clearly

Today's Date _____

| <i>Last Name</i> | <i>First</i> | <i>Middle Initial</i> | <i>Maiden Name</i> |
|------------------|--------------|-----------------------|--------------------|
| | | | |

| <i>Street Address</i> | <i>City</i> | <i>State</i> | <i>Zip Code</i> |
|-----------------------|-------------|--------------|-----------------|
| | | | |

How long have you lived at this address? _____

| <i>Home Phone</i> | <i>Cell Phone</i> | <i>Best time to call</i> |
|-------------------|-------------------|--------------------------|
| () - | () - | |

Position Applied for: _____

Are you seeking Full or Part-time work? _____

What hours are you available to work?
Monday _____ Tuesday _____ Wednesday _____
Thursday _____ Friday _____ Saturday _____
Sunday _____

This position could entail evening and weekend hours as well as daytime hours and requires dependable job attendance. Can you meet these requirements? Yes No

If not, please explain _____

When are you available to begin work? _____

What is your desired rate of pay? _____

Are you eligible for employment in the United States? Yes No

Have you ever been convicted of a felony? Yes No

Answering yes to this question will not exclude you from eligibility for this position

| Education | School Name and Location | Course of Study | Graduate? | # of years | Degree/Diploma |
|----------------|--------------------------|-----------------|-----------|------------|----------------|
| High School | | | | | |
| College | | | | | |
| College | | | | | |
| Bus/Tech/Trade | | | | | |

LIST BELOW ALL PRESENT & PAST EMPLOYMENT BEGINNING WITH MOST RECENT

| | | | |
|--|---------------------|---|--|
| Name & Address of Company (Describe business type) _____ | | Dates Employed: _____ | |
| _____ | | From _____ to _____ | |
| _____ | | Job Title _____ | |
| Phone (____) _____ | Compensation: _____ | | |
| Reason for Leaving _____ | Start _____ | Last _____ | |
| Duties _____ | | | |
| Supervisor _____ | | May we contact them? Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Name & Address of Company (Describe business type) _____ | | Dates Employed: _____ | |
| _____ | | From _____ to _____ | |
| _____ | | Job Title _____ | |
| Phone (____) _____ | Compensation: _____ | | |
| Reason for Leaving _____ | Start _____ | Last _____ | |
| Duties _____ | | | |
| Supervisor _____ | | May we contact them? Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| Name & Address of Company (Describe business type) _____ | | Dates Employed: _____ | |
| _____ | | From _____ to _____ | |
| _____ | | Job Title _____ | |
| Phone (____) _____ | Compensation: _____ | | |
| Reason for Leaving _____ | Start _____ | Last _____ | |
| Duties _____ | | | |
| Supervisor _____ | | May we contact them? Yes <input type="checkbox"/> No <input type="checkbox"/> | |

Please list two, non-family member references.

Name: _____

Phone Number: _____

Name: _____

Phone Number: _____

I certify that all of the information on this application, my resume, and all supporting documents is correct, and I understand that any misrepresentation or omission of any information may result in disqualification from consideration for employment or, if employed, my termination.

Applicant Signature: _____

Date: _____