

# Spit Shine LLC

## APPLICATION OF EMPLOYMENT

### Personal Information

Last	First	MI	SSN#	Email	
Street Address			City	ST	Zip
Home Phone			Cell Phone		
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, Date of Birth	
Have you ever been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, please explain:		
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No      Branch:			Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No		
What position are you applying for?			How did you hear about this position?		
Expected Hourly Rate		Expected Weekly Earnings		Date Available	

### Prior Work Experience

	Current or Most Recent	Prior	Prior
<b>Employer</b>			
<b>Address</b>			
<b>City,ST, Zip</b>			
<b>Telephone</b>			
<b>Name of Immediate Supervisor</b>			
<b>Date of Employment</b>	From                      To	From                      To	From                      To
<b>Position/ Job Title</b>			
<b>Pay</b>			
<b>Reason for Leaving</b>			
<b>May we Contact</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

### Education

	Name/ Location	Last Year Completed	Degree	Major or Emphasis
<b>High School</b>		9   10   11   12		
<b>College/University</b>		1   2   3   4		
<b>Trade School</b>				
<b>Other</b>				

Disclaimer- By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.	Signature	Date
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