



APPLICATION FOR EMPLOYMENT

PRE EMPLOYMENT QUESTIONNAIRE

AN EQUAL OPPORTUNITY EMPLOYER (EOE M/F/D/V)

PERSONAL INFORMATION

DATE

NAME

LAST

FIRST

MIDDLE

PRESENT ADDRESS

STREET

CITY

STATE

PERMANENT ADDRESS

STREET

CITY

STATE

PHONE NO.

ARE YOU 18 YEARS OR OLDER Yes No

SPECIAL QUESTIONS

Do not answer **ANY** of the questions in this framed area unless the employer has **CHECKED** a **BOX PRECEDING** a question, thereby indicating that the information is required for a bona fide occupational qualification, or dictated by national security laws or is needed for other legally permissible reasons.

- Height _____ feet _____ inches
- Weight _____ lbs
- What Foreign Languages Do You Speak Fluently? _____ Read _____ Write _____
- _____
- Citizen of U.S. ____ Yes ____ No
- Date of Birth* _____

* The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

EMPLOYMENT DESIRED

Position _____ Date you Can Start _____ Salary Desired _____

Are You Employed Now? _____ If So, May We Inquire Of Your Present Employer? _____

Ever Applied To Hardy Brake Before? _____ Where? _____ When? _____

EDUCATION	Name And Location Of School	*No. of years attended	*Did you graduate	Subjects Studied
Grammer School				
High School				
College				
Trade, Business or Correspondence School				

GENERAL

Subjects Of Special Study Or Research Work

U.S. Military Or
Naval Service

Rank

Present Membership In
National Guard Or Reserves

FORMER EMPLOYERS		Name And Address Of Employer	Salary	Position	Reason For Leaving
From					
To					
From					
To					
From					
To					
From					
To					

REFERENCES		Give The Names Of Three Persons (Not Related To You) Whom You Have Known At Least One Year		
Name	Address	Business	Years Acquainted	

PHYSICAL RECORDDo You Have Any Physical Limitations That Preclude You From Performing Any Work For Which You Are Being Considered? Yes No

If So, Please Describe:

Emergency Contact:

Name

Address

Phone Number

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice.

Date

Signature

Do Not Write Below This Line

Interviewed By _____ Date _____

Hired Yes No

Position:

Dept:

Salary/Wage:

Date Reporting To Work:

Approved: 1.

2.

3.