
Employment Application

Position Applied For _____ Application Date _____

Personal Information

Name: _____
Last First MI

Address: _____
Street City State Zip

Home phone #: _____ Alternate #: _____

Drivers License #: _____ Social Security #: _____

Are you available to work: Full time Part-time Available Hours: _____

If you are under 18 years of age, can you provide required proof of work eligibility? Yes No

Have you ever worked or submitted an application with this agency before? Yes No

If yes, when _____

Are you currently employed? Yes No

May we contact your current employer? Yes No

Are you eligible to work in the United States? Yes No

Have you ever been convicted of a crime, excluding misdemeanors? (If yes, attach explanation.) Yes No

Do you have a reliable means of transportation? Yes No

Have you ever been discharged from any employment or been asked to resign? Yes No

Explain:

Are you bound by any agreement(s) (including signing a non-competition, non-disclosure, or non-piracy agreement) that would limit your ability to work for the agency? Yes No

(If yes, attach copy to this application.)

Employment (Start with most recent employment and work backwards)

Employer:	Telephone Number:
Full Address:	
Supervisor's Name & Title:	
Employment Start Date:	Employment End Date:
Ending Compensation:	Reason for Leaving:
Describe work performed:	

Employer:	Telephone Number:
Full Address:	
Supervisor's Name & Title:	
Employment Start Date:	Employment End Date:
Ending Compensation:	Reason for Leaving:
Describe work performed:	

Employer:	Telephone Number:
Full Address:	
Supervisor's Name & Title:	
Employment Start Date:	Employment End Date:
Ending Compensation:	Reason for Leaving:
Describe work performed:	

Education

Name of School	Address of School	Grade Completed or Degree	Subjects Studied

Licenses

P&C License	___ Yes ___ No	State & License #
L&H License	___ Yes ___ No	State & License #
Series 6 or 7 License	___ Yes ___ No	State & License #
Other Licenses	Describe:	State & License #

Professional Designations (Check all that apply)

___ CIC ___ CPCU ___ CLU ___ CHFC ___ CRM ___ CISR ___ Other _____

Agency Systems

What Rater(s) are you familiar with? _____

Proficiency Level: Excellent _____ Above Average _____ Good _____ Fair _____

What Management System(s) are you familiar with? _____

Proficiency Level: Excellent _____ Above Average _____ Good _____ Fair _____

Technology Proficiency Level:

Excellent _____ Above Average _____ Good _____ Fair _____

References

Name	
Address	
Phone #	
Relationship	

Name	
Address	
Phone #	
Relationship	

Name	
Address	
Phone #	
Relationship	

Additional Experience or Qualifications

List any other experience, skills or qualifications that you believe should be considered in evaluating your qualifications for employment.

Applicant Information Release

I hereby authorize any person, educational institution, or company I have listed as a reference on my employment application to disclose in good faith any information they may have regarding my qualifications and fitness for employment. I will hold [Your Business], any former employers, educational institutions, and any other persons giving references free of liability for the exchange of this information and any other reasonable and necessary information incident to the employment process.

Signed: _____

Date: _____