Employment Application

Please following these instructions.

1. Print the document and fill it out using a dark pen 2. FAX - 801-375-7707 or email - info@franklinsquires.com this document.

Applicant Information									
Full Name: (Last Name First)				Today's Date:	Today's Date:				
Address:(Street)		Apartment/L	Jnit #						
City:			State:		Zip Code:				
Phone:		E-mail A	nail Address:						
Date Available:	Social Security No.:	Desired salary: \$							
Position Applied for:		☐ FT	□ РТ	Morning	Afternoon	☐ Evening			
Are you a citizen of the United States?	y 🔲 N	If not, are you authorized to work in the U.S.? Y N							
Have you ever worked for this company?	ou ever worked for this company?								
Have you ever been convicted of a felony?	Have you ever been convicted of a felony? Y N								
If yes, explain:									
	Edu	cation							
High School:									
From: To:	Did y		graduate?	□ Y □ N	Degree:	Degree:			
College:		Address	ress						
From: To:	m: To:		graduate?	☐ Y ☐ N Degree:					
Other:		Address							
From: To:		Did you graduate?		□ y □ N	Degree:				
References									
(Please list three professional references.)									
Full Name:			Relationship:						
Company:			Phone:						
Address:									
Full Name:			Relationship:						
Company:			Phone:						
Address:									
Full Name:			Relationship:						
Company:			Phone:						
Address:									

Pr	revious Employment (r	nost recent first)							
Company:		Phone							
Address:		Supervisor:	Supervisor:						
Job Title:	Job Title:		Ending	g Salary: \$					
Responsibilities:	Responsibilities:								
From: To:	Reason for leaving:	ving:							
May we contact your previous supervisor for a reference?									
Company:			Phone:						
Address:	Supervisor:	Supervisor:							
Job Title:	Starting Salary: \$	Starting Salary: \$ Ending							
Responsibilities:									
From: To:	Reason for leaving:								
May we contact your previous supervisor for a reference?									
Company:			Phone	:					
Address:	Supervisor:	Supervisor:							
Job Title:		Starting Salary: \$	Endinç	nding Salary: \$					
Responsibilities:									
From: To:	To: Reason for leaving:								
May we contact your previous supervisor for a reference?									
	Military Ser	vice							
Branch:	om: To:								
Rank at Discharge:	-	Type of Discharge:	pe of Discharge:						
If other than honorable, explain:									
	Disclaimer and S	Signature							
I certify that my answers are true and com									
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.									
Signature:		Date:							
<u> </u>									
Interviewer 1:									
Interviewer 2:									
Full / Part	AM / PM			System					