

APPLICATION FOR EMPLOYMENT (NON-TEACHING)

Date _____

POSITION APPLYING FOR _____

NAME _____
Last First Middle

Local mailing address _____
Number Street City State ZIP

Telephone _____ **E-mail** _____
Home Business

Social Security # _____ **Passport No.** _____ **Type of Visa** _____

Are you eligible to work in the U.S.? No Yes
 Are you a SOFA ID card holder? No Yes
 Have you ever been convicted or pleaded no contest to a crime? No Yes

Available for employment from _____ to _____ Minimum salary range acceptable: \$ _____ / per month
 Categories available: Full-time Part-time
 Have you filed an application here before? No Yes If yes, give date _____
 Have you ever been employed here before? No Yes If yes, give date _____

FOR FAMILY MEMBERS OF U.S. FORCES PERSONNEL

Sponsor's name _____ **Relationship** _____

Squadron/Unit _____ **Duty Phone** _____

Schools/Colleges Attended	Name and Address of School	Dates From To	Number of Years and Credit Hours Completed	Major(s) or Type of Program	Degree Granted or Certification and Date
High School or Grade Diploma					
College (Submit Transcript)					
Graduate School (Submit Transcript if Graduated)					
Vocational/Business School					

Note: If selected for employment, official transcripts are required from regionally accredited institutions.

Are you proficient at using any of the following? Check all that apply.

Microsoft Word Microsoft Power Point other word processing program (specify) _____
 Microsoft Excel People Soft other spreadsheet program (specify) _____
 MicrosoftAccess CS3 or CS4 other program (specify) _____

List additional special qualifications and skills (computer programming languages known, foreign languages spoken, etc.):

If you are not selected for the position, do you want to be considered for other positions? Yes No

EMPLOYMENT RECORD CONTINUATION SHEET		NAME	SSN
Employer	Dates of Employment From To MO YR MO YR 	List your Duties and Responsibilities	
Address			
Telephone			
Your Title			
Name and Title of Supervisor	HOURLY RATE/ SALARY START FINAL 		
Explain your reason for leaving			
Employer	Dates of Employment From To MO YR MO YR 	List your Duties and Responsibilities	
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