

PERSONAL INFORMATION:

Name:			_	Date:		
(First) (Middle) (Last)					
Permanent Address:			_	Apt.	#:	
City, State, Zip:				Phone Number: ()		
MISCELLANEOUS INFORMATION:						
Position applying for:					Date available to start:	
How did you learn about this vacancy?					Salary expectations:	
Have you ever been employed by Halquist?		Yes		No	If yes, when?	
Have you ever been convicted of a *criminal offense? (other than a minor traffic violation)		Yes		No	If yes, describe?	
*Please note: "A conviction is not an absolute bar to employment."						
Have you ever been terminated or forced to resign?		Yes		No	If yes, explain?	
May we inquire of your present employer?		Yes		No		

EDUCATION:

School	Name & Location	Years Attended	Did you graduate?	Course of Study
Grammer School				
High School				
College				
Trade/Business School				

Please list any other details necessary to complete or clarify your applications including special skills, activities and/or any U.S. Military Service._____

Do you hold a Commercial Drivers License (CDL)? □ Yes □ No If yes, what type?_____

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EMPLOYMENT HISTORY:

		DATES OF EMPLOYMENT:
Present or last employer:		From
Address:	Phone: ()	Month/Day/Year
City:	_State:Zip:	To Month/Day/Year
Position:		Hours per week
Job Duties:		
Name of immediate supervisor:		Full-time/Part-time?
Previous employer:		From Month/Day/Year
Address:	Phone: ()	Month/Day/Year
City:	_State:Zip:	To Month/Day/Year
Position:	-	Hours per week
Job Duties:		
Name of immediate supervisor:		Full-time/Part-time?
Previous employer:		From
Address:	Phone: ()	Month/Day/Year
City:	_State:Zip:	To Month/Day/Year
Position:		Hours per week
Job Duties:	Reason for leaving:	
Name of immediate supervisor:		Full-time/Part-time?
Previous employer:		From
Address:	Phone: ()	Month/Day/Year
City:	State: Zip:	To Month/Day/Year
Position:		Hours per week
Job Duties:	Reason for leaving:	
Name of immediate supervisor:		Full-time/Part-time?
Previous employer:		From
Address:	Phone: ()	Month/Day/Year
City:		To Month/Day/Year
Position:		Hours per week
Job Duties:	Reason for leaving:	Hours per week
Name of immediate supervisor:		Full-time/Part-time?

PROFESSIONAL REFERENCES:

Name and Title	Work Relationship	Address and Phone Number
1.		
2.		
3.		

I certify 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, and release all parties from all liability for any damages 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 prior notice and without cause.

Date:_____Signature____

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