



**GENERAL**

Subjects of special study or research work \_\_\_\_\_

U.S. Military or Naval Service \_\_\_\_\_

Rank \_\_\_\_\_

Present Membership in National Guard or Reserves \_\_\_\_\_

**PHYSICAL HISTORY**

Do you have any physical condition which may limit your ability to perform the job applied for? \_\_\_\_\_

If yes, what can be done to accommodate your limitation? \_\_\_\_\_

Would you be willing to take a physical examination? \_\_\_\_\_

**EMPLOYMENT HISTORY**

(Note: List last four employers in reverse order starting with the most recent. Add another sheet as necessary.)

EMPLOYER			DATE		
NAME:			FROM: MO.	YR.	TO: MO. YR.
ADDRESS:			POSITION HELD:		
CITY	STATE	ZIP	SALARY/WAGE:		

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## Voluntary Applicant Survey

### Instructions to Applicants

We are an equal opportunity employer and may be subject to various affirmative actions regulations, therefore we ask all applicants to supply the following information for data gathering purposes. You *do not* have to complete this form to be considered for employment. Any information volunteered will be kept confidential and *will not be used* to make hiring decisions.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_

Sex:  Male  Female

Race/Ethnicity \_\_\_\_\_

01  White

02  Black

03  Hispanic/White

17  Hispanic/Not White

05  Native America

04  Asian

20  Hawaiian or Pacific Islander

Job opening for which you are applying:

\_\_\_\_\_

For Office Use Only:

Job # \_\_\_\_\_

EEO# \_\_\_\_\_

Job Group # \_\_\_\_\_

### How did you learn about the opening:

A  Newspaper Ad

B  Magazine Ad

C  Placement Agency

D  Walk-in

E  Male Employee

F  Female Employee

G  Minority Employee

H  Disabled Site Posting

I  Company's Website

J  Internet Job Posting

K  Military/Vets Posting

L  High School

M  Job Fair

N  Friend of a Friend

O  Employment Bureau

P  College

Q  I am a Current Employee, self referral

R  I am a Current Employee, mgmt referral

S  Other

### Veteran Status:

Not a Veteran

Newly Separated Veteran

Special Disabled Veteran

Vietnam Era Veteran

Other Eligible Veteran

Yes, a Veteran, but none of the above

Please detach this form from the application and give to the Receptionist. **Thank-you!**