



Paul B



Family of Paul B. Zimmerman Inc. Companies

717-738-7365 ext.841

Application for Employment

No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

Applicant Name: _____ Date: _____

Address: _____ Telephone # () _____

Date of Birth: _____ (optional if age 18 or more) Social Security # _____

Position applying for or type of work desired: _____

Type of employment desired: _____ full-time _____ part time _____ temporary

Date you would be available to begin employment: _____

Can you submit proof of identity and legal employment eligibility? _____ Yes _____ No

If you are under 18, can you furnish a work permit as required? _____ Yes _____ No

Do you have any objection to working overtime if necessary? _____ Yes _____ No

Are you available to work evenings and Saturdays? _____ Yes _____ No

How were you referred to us? _____

Employment History

Please provide previous employment information beginning with the most recent

Employer: _____ Position Held: _____

Address: _____ Telephone # _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____ Salary: _____

Job summary: _____

Reason for leaving: _____

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Immediate supervisor and title: _____
Dates employed: from _____ to _____ Salary: _____
Job summary: _____
Reason for leaving: _____

Other Skills and Qualifications

Summarize any job-related training, skills, experience or other information you think would be helpful:

Educational History

List school name, location and years completed.

High School: _____

College: _____

Other: _____

References

List names, phone numbers and relationship of 3 persons not related to you, who know your qualifications:

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references, as well as any criminal background checks considered necessary. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I acknowledge that I have read and understand the foregoing, and that this application expires after 30 days.

Applicant signature: _____ Date: _____