

## APPLICATION FOR EMPLOYMENT

## EQUAL OPPORTUNITY EMPLOYER

DATE	PHONE #				
NAMELast		First		M.I.	
ADDRESSNO.	STREET		CITY	STATE	ZIP
HOME					
ADDRESSNO.	STREET		CITY	STATE	ZIP
ARE YOU AT LEAST 18 YE	ERS OLD?	SOCIAL S	ECURITY NUMB	BER	
POSITION APPLIED FOR				OF PAY EXPECTED_	
WOULD YOU WORK: FU	THE R. P. LEWIS CO., LANSING, MICH. 49-14039-1-120-1-1-120-1-1-120-1-1-120-1-1-120-1-1-120-1-1-120-1-1-120-1-1-120-1-1-120-1-1-120-1-1-120-1-1-1-1	PA	RT TIME	water the second	
SPECIFY DAYS AND HOU					
WERE YOU PREVIOUSLY	EMPLOYED BY	McLANAHAN'S	?		
IF YES, WHEN AND WHE	RE				
LIST ANY FRIENDS OR R					RELATED
LIST ANY FRIENDS OR R	ELATIVES WOR		NAME		RELATED
E-MAIL	ADDRESS:				
SUMMARIZE SPECIAL SKILLS	& QUALIFICATIONS	ACQUIRED FROM C	THER JOBS AND EX	KPERIENCE	
A promoved to the first term	and the second				
			out of the second		
				The second secon	
		and the same of the last contract of	and the second second second		
The second secon		CONTRACTOR OF THE STATE OF	Charles and Charles To Charles	MACHINE THE PROPERTY.	

SCHOOL	NAME & LOCATION	MAJOR	HIGHEST GRADE COMPLETED
SECONDARY	AND THE CONTRACT A PROPERTY OF THE PARTY.		Service Androne
COLLEGE			
OTHER			

## BEGINNING WITH YOU MOST RECENT POSTION, LIST ALL PRESENT AND PAST EMPLOYMENT

1. COMPANY NAME: ADDRESS:		EMPLOYED:	NAME OF SUPERVISOR:
		FROM: TO:	
		RATE OF PAY:	JOB TITLE:
		START: LAST:	DESCRIBE MAJOR FUNCTIONS OF YOUR JOB
PHONE:	TYPE OF BUSINESS:	REASON FOR LEAVING:	
2. COMPANY NAME:		EMPLOYED:	NAME OF SUPERVISOR:
		FROM: TO:	
ADDRESS:		RATE OF PAY:	JOB TITLE:
		START: LAST:	DESCRIBE MAJOR FUNCTIONS OF YOUR JOB:
PHONE:	TYPE OF BUSINESS:	REASON FOR LEAVING:	
3. COMPANY NAME:		EMPLOYED:	NAME OF SUPERVISOR:
×		FROM: TO:	
ADDRESS:		RATE OF PAY:	JOB TITLE:
		START: LAST:	DESCRIBE MAJOR FUNCTIONS OF YOUR JOB:
PHONE:	TYPE OF BUSINESS	REASON FOR LEAVING:	
4. COMPANY NAME:		EMPLOYED:	NAME OF SUPERVISOR:
ADDRESS		FROM. TO:	IOD THE C.
ADDRESS:		RATE OF PAY: START: LAST:	JOB TITLE:  DESCRIBE MAJOR FUNCTIONS OF
PHONE: TYPE OF BUSINESS:		REASON FOR LEAVING:	YOUR JOB:
	_		
		CONTRACTOR DESCRIPTION OF	CANADA AND DESCRIPTION OF THE PARTY OF THE P
MAY WE CONTACT	THE EMPLOYERS LISTE	ED ABOVE?	
F NOT, INDICATE BY	Y NUMBER WHICH ONE	ES(S) YOU DO NOT WISH US TO	CONTACT:
HE FACTS SET FORTH A	BOVE IN MY ADDITION A	RE TRUE AND COMPLETE, TUNDERS	TAND THAT IF EMPLOYEED EALSE
TATEMENTS ON THIS AP	PPLICATION SHALL BE CONS	IDERED SUFFICIENT CAUSE FOR DISM	

INTERVIEWER

DATE