

## **Palm Harbor ACE**

35125 U.S. Highway 19 N Palm Harbor, FL 34684 (727) 424-3589 dave@lamont.com

			Applicant I	nrormau	911					
Full Name:							Date:	<b>/</b> / mm / dd / yyyy		
Tuli Name.	Last		First			M.I.	Date.	пшт аат уууу		
Address:										
	Street Addre	ess		Apartment/Unit #						
	City					State		ZIP Code		
Phone: (	) -		E-ma	il Address	3:					
Date Available: Social Security No.: Desired Salary: \$										
Position Applied for:  Please indicate hours you are available:  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday										
•		•	YES NO	•		•	,	YES NO		
Are you a citizen of the United States?										
Have you ever worked for this company?  YES NO  If yes, when?										
Have you ever been convicted of a felony?  YES NO  I										
If yes, explain:										
Education										
High School:			Address:							
-		_		YES	NO	_				
From:	ı	ō:	Did you graduate?			Degree:				
College:			Address:	VEO	NO					
From:	Т	ō:	Did you graduate?	YES	NO	Degree:				
Other:			Address:							
From:	Т	- o:	Did you graduate?	YES	NO	Degree:				
			Additional Ski	lls or Tra	ining					
☐ Point of Sale workstation/ Cash Register ☐ Paint Mixing Equipment										
☐ Word Processing				☐ Plumbing						
☐ Personal Computer				☐ Electrical						
☐ Key Cutting Machine Other Skills Explain:					☐ Building Construction					

Previous Employment											
Company:					Phone:	(	)	-			
Address:				5	Supervisor:						
Job Title:		Starting Salary	/: <b>\$</b>			Enc	ding S	alary:	\$		
Responsibilities:											
From:	То:	Reason for Leaving	j:								
May we contact your pr	evious supervisor for	s ] 	NO								
Company:					Phone:	(	)	-			
Address:				5	Supervisor:						
Job Title:		Starting Salary	<b>/</b> : \$			Enc	ding S	alary:	\$		
Responsibilities:											
From:	То:	Reason for Leaving	j:								
May we contact your pr	evious supervisor for	a reference?	1	NO							
Company:					Phone:	(	)	-			
Address:				5	Supervisor:						
Job Title:		Starting Salary	<b>/</b> : \$			Enc	ding S	alary:	\$		
Responsibilities:											
From:	То:	Reason for Leaving	j:								
May we contact your pr	evious supervisor for	a reference?	s ]	NO							
		Military Ser	vice								
Branch:					From:			To:			
Rank at Discharge: Type of Discharge:											
If other than honorable, explain:											
Disclaimer and Signature											
I certify that my answers are true and complete to the best of my knowledge.											
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.											
Signature: Date:											