

HOLLIS TV INC.
Employment Application

APPLICANT INFORMATION

Last Name:			First:			M.I.			Date:	/	/	/
Street Address:							Apartment/Unit #					
City:					State:			ZIP:				
Phone:	()			E-mail Address:								
Date Available:	/	/	Social Security #:	-	-	Desired Salary:	\$					
Position Applied for:												
Are you a citizen of the United States?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
Have you ever worked for this company?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If so, when?							
Have you ever been convicted of a felony?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	If yes, explain:							

EDUCATION

High School:				Address:								
From:		To:		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree:			
College:				Address:								
From:		To:		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree:			
Other:				Address:								
From:		To:		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree:			

PROFESSIONAL REFERENCES

Please list three professional references. If you would like to include personal references, please list them on page three of this form.

Full Name:				Relationship:								
Company:				Phone:	()			
Address:												
Full Name:				Relationship:								
Company:				Phone:	()			
Address:												
Full Name:				Relationship:								
Company:				Phone:	()			
Address:												

Applicant name: _____

PREVIOUS EMPLOYMENT

Company:				Phone:	()
Address:				Supervisor:	
Job Title:		Starting Salary:	\$	Ending Salary:	\$
Responsibilities:					
From:		To:		Reason for Leaving:	
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Company:				Phone:	()
Address:				Supervisor:	
Job Title:		Starting Salary:	\$	Ending Salary:	\$
Responsibilities:					
From:		To:		Reason for Leaving:	
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Company:				Phone:	()
Address:				Supervisor:	
Job Title:		Starting Salary:	\$	Ending Salary:	\$
Responsibilities:					
From:		To:		Reason for Leaving:	
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			

MILITARY SERVICE

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:	/ /
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Applicant name: _____

PERSONAL REFERENCES

List any personal references. List your professional references on page one of this form.

Full Name:		Relationship:	
Years known:		Phone:	()
Address:			
Full Name:		Relationship:	
Years known:		Phone:	()
Address:			
Full Name:		Relationship:	
Years known:		Phone:	()
Address:			
Full Name:		Relationship:	
Years known:		Phone:	()
Address:			
Full Name:		Relationship:	
Years known:		Phone:	()
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Full Name:		Relationship:	
Years known:		Phone:	()
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Full Name:		Relationship:	
Years known:		Phone:	()
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Full Name:		Relationship:	
Years known:		Phone:	()
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Full Name:		Relationship:	
Years known:		Phone:	()
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Full Name:		Relationship:	
Years known:		Phone:	()
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Full Name:		Relationship:	
Years known:		Phone:	()
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Full Name:		Relationship:	
Years known:		Phone:	()
Address:			
Full Name:		Relationship:	
Years known:		Phone:	()
Address:			