

ECLIPSE MESSENGER SERVICE, INC.

Employment Application



APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Home phone (Not a cell) ()		Cell phone (if available) ()	
Emergency Contact Name:	Relation:	Phone: ()	
e-Mail	Social Security No.	Desired Salary	
Position Applied for <input type="checkbox"/> Driver <input type="checkbox"/> Bobtail <input type="checkbox"/> Sales/Marketing <input type="checkbox"/> Office (specify):			
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

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

AVAILABILITY

Apart from absence for religious observance, are you available to work full time?

Will you work overtime if asked?

Please check your preferred work schedule:

Full Time: No Restrictions on hours or days (Proceed to section B)

Part Time: (Proceed to section A)

Section A:

I am only available to work Part Time because: Student Another Job Other (Explain Below)

Section B:

Please specify the hours you are available to work. Write "None" on any day you will not be available:

Monday	From	hrs	to	hrs	Tuesday	From	hrs	to	hrs
Wednesday	From	hrs	to	hrs	Thursday	From	hrs	to	hrs
Friday	From	hrs	to	hrs	Saturday	From	hrs	to	hrs
Sunday	From	hrs	to	hrs					

Section C:

On what day will you be able to start work?

VEHICLE(S)

Please provide information regarding the vehicle(s) you own and may use during the course of your employment.

Vehicle #1

Year:	Make:	Model:	Color:
License Plate #:	Registration Expires: (Month and Year)		

Vehicle #2

Year:	Make:	Model:	Color:
License Plate #:	Registration Expires: (Month and Year)		

AUTOMOBILE INSURANCE

All of our drivers must abide by California law and keep a copy of their current registration and proof of current insurance in their vehicle at all times. You must also keep your current driver's license in your possession at all times while operating a motor vehicle.

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 hereby declare that the information provided by me on this application is true, correct and complete to the best of my knowledge. I understand that if employed, any misstatements or omission of fact shall be considered cause for my dismissal. I understand I am required to abide by all rules and regulations of Eclipse Messenger Service, Inc. I also understand and agree that if I am hired, my employment is for no definite period, and may regardless of the date of payment of any wage or salary, be terminated at any time without previous notice.

I authorize any investigation of my prior work history, references, criminal history and military service as well as any and all other information contained on this application to determine my eligibility for employment with Eclipse Messenger Service, Inc.

Signature	Date
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