

336-699-8468

336-830-8468

East Bend

Last Name:

Winston Salem

Wilkesboro

Mooresville

Today's Date:

Email applications to:

Allen.marvinsgaragedoors@gmail.com

First:

Carson.marvinsgaragedoors@gmail.com

## Application for Employment

## **An Equal Opportunity Employer**

Marvin's Company does not discriminate against applicants or employees because of age, race, color, religion, creed, national origin sex, marital status, or any other basis prohibited by law. No question on this application is intended to secure information to be used for such

Middle:

Present Address:	City and State:	Zip Code:	Are you over the age of 21 years? Please Circle				
			<u>years?</u> Please Circle				
			Yes No				
Home Phone:	Date of Birth:	Social Security #:	Citizen, or legal rights to work				
			in U.S? Please Circle				
Cell Phone:	Email		Yes No				
Salary Expected:	Do you have access to an	Has your driver's license ever been	Driver License #:				
	automobile? Please Circle	revoked or suspended? Please Circle					
	Yes No	Yes No					
Have very even been associated of one	ima 2 Blazza Cirala Van Na						
Have you ever been convicted of any crime? Please Circle. Yes No							
<u>If yes, Explain:</u>							
Do you have any physical condition which may limit your ability to perform the particular job for which you are applying?							
Maria Francisco							
If yes, Explain:							
What date will you be available for work?							

## **EDUCATION:**

TYPE OF SCHOOL	NAME OF SCHOOL	GRADE AVG.		CIRCLE LAST COMPLETED YEAR		
High School	*		9 10	11 12		
College			Certificate Bachelors	Associates  Masters		
College			Certificate	Associates  Masters		
Other						

PROFESSIONAL CERTIFICATIONS:	
ARE YOU CURRENTLY EMPLOYED?	
IF YES, WHERE AND JOB TITLE	

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-EMPLOYER'S NAME				STARTING	LEAVING	
ADDRESS, CITY,	D/	ATE	NAME OF	SALARY	SALARY	
STATE			POSITIONS/	PER HR.	PER HR.	REASON FOR LEAVING
-SUPERVISOR NAME			RESPONSIBILITIES			
AND TELEPHONE						
NUMBER	FR	OM				
**PLEASE INCLUDE	FROM					
MILITARY EXP. TOO**						
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2.	MO.	YR.				
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2	140	VD				
3.	MO.	YR.				
			,			
4.	MO.	YR.				
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## **REFERENCES:**

1. NAME	JOB TITLE:	RELATIONSHIP? SUPERVISOR?	TELEPHONE
2. NAME	JOB TITLE:	RELATIONSHIP? SUPERVISOR?	TELEPHONE

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with this company will be based on your merit and no other consideration.

\*THIS APPLICATION WILL BE HELD ON FILE FOR 90 DAYS\*