

FARLEY'S HOUSE OF PIANOS LLC

Employment Application



APPLICANT INFORMATION

Last Name _____ First _____ Middle _____ Date _____

Street Address _____ Apartment/Unit # _____

City _____ State _____ ZIP _____

Phone _____ E-mail Address _____

Date Available: _____ Social Security No. _____ Date of Birth _____

Position Applied for: _____ Days Available: _____ How Long Can You Commit For? _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for Farley's before? YES NO If so, when? _____

Have you ever been convicted of a felony? YES NO If yes, explain _____

EDUCATION

High School _____ Address _____

From _____ To _____ Did you graduate? YES NO Degree _____

College _____ Address _____

From _____ To _____ Did you graduate? YES NO Degree _____

Other _____ Address _____

From _____ To _____ Did you graduate? YES NO Degree _____

REFERENCES

Please list two professional references.

Full Name _____ Relationship _____

Company _____ Phone () _____

Address _____

Full Name _____ Relationship _____

Company _____ Phone () _____

Address _____

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

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"/>

OTHER INFORMATION	
Do you have any physical limitations that preclude you from performing any work for which you are being considered? Explain	
In case of an emergency contact: Phone	

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. I understand that if employed, falsified statements on this application shall be grounds for dismissal.	
I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.	
I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated without prior notice.	
Signature	Date