W.T. Fary Brothers Company, LLC PO Box 7 Ark, VA 23003

804-693-2544 804-694-0118 fax

APPLICATION FOR EMPLOYMENT

PART A: PERSONAL INFORMATION

NAME:	DATE
HOME	
ADDRESS:	
HOME PHONE:	CELL
SOCIAL SECURITY NO:_	
DATE OF BIRTH	
DO YOU HAVE A COMM	MERCIAL DRIVR'S LICENSE?
YESNO	
IF YES, EXPIRATION DA	ATE:
WHAT COMMERICIAL V	VEHICLES HAVE YOU
DRIVEN?	
PART B: EDUCATIONA	AL BACKGROUND
HIGH SCHOOL	
NAME:	
CITY/STATE	
DATE OF GRADUATION	N:

COLLEGE OR TECHNICAL SCHOOL
NAME:
CITY/STATE
DATE OF GRADUATION
PART C EMPLOYMENT HISTORY
NAME OF MOST RECENT EMPLOYER
ADDRESS:
PHONE NO: SUPERVISOR
POSITION HELD:
DATES OF EMPLOYMENT:
REASON FOR LEAVING
PART D
HAVE YOU EVER BEEN CONVICTED OF A FELONY?
HAVE YOU EVER HAD ANY TRAFFIC VIOLATIONS?
IF YES, PLEASE GIVE DATES &
EXPLAIN
PART E: REFERENCES
1. NAME:PHONE
ADDRESS

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2. NAME:	PHONE	
ADDRESS		_
TODAY'S DATE		
SIGNATURE		