



CAREER HISTORY FORM

This information will not be the only basis for hiring decisions. You are not required to furnish any information that is prohibited by federal, state or local law.

Last name	First	Middle	
Home address	City	State	Phone number
Business address	City	State	Phone number
Email address			Date

Position applied for: _____ Earnings expected \$ _____

I. BUSINESS EXPERIENCE: (PLEASE START WITH YOUR PRESENT OR MOST RECENT POSITION)

A. Firm _____ Phone _____ Kind of business _____

Address _____ City _____ State _____ Zip _____

Employed from _____ to _____ Base \$ _____

(Show months as well as years)

Bonus \$ _____

Title _____ Other \$ _____

Supervisory responsibility _____ Initial total compensation \$ _____

Name & title of immediate supervisor _____ Final total compensation \$ _____

What do/did you like most about your job? _____

What do/did you least enjoy? _____

Reasons for leaving or desiring to change _____



B. Firm _____ Phone _____ Kind of business _____

Address _____ City _____ State _____ Zip _____

Employed from _____ to _____ Base \$ _____
(Show months as well as years)

Bonus \$ _____

Title _____ Other \$ _____

Supervisory responsibility _____ Initial total compensation \$ _____

Name & title of immediate supervisor _____ Final total compensation \$ _____

What did you like most about your job? _____

What did you least enjoy? _____

Reasons for leaving or desiring to change _____

C. Firm _____ Phone _____ Kind of business _____

Address _____ City _____ State _____ Zip _____

Employed from _____ to _____ Base \$ _____
(Show months as well as years)

Bonus \$ _____

Title _____ Other \$ _____

Supervisory responsibility _____ Initial total compensation \$ _____

Name & title of immediate supervisor _____ Final total compensation \$ _____

What did you like most about your job? _____



What did you least enjoy? _____

Reasons for leaving or desiring to change _____

OTHER POSITIONS HELD:

a. Company	a. Your title	Date (mo./yr.)	Compensation	a. Type of work
b. City, state	b. Name of supervisor	a. Began b. Left	a. Initial b. Final	b. Reason for leaving

D.

a. _____

b. _____

E.

a. _____

b. _____

F.

a. _____

b. _____

G.

a. _____

b. _____

Which employers do you not wish to be contacted? _____

II. MILITARY EXPERIENCE

If in service, indicate branch. _____

Date (mo./yr.) entered _____ Date (mo./yr.) discharged _____

Highest rank or grade _____

Terminal rank or grade _____



Publications, patents, inventions, professional licenses or additional special honors or awards _____

What qualifications, abilities and strong points will help you succeed in this job? _____

What are your weakest points and areas for improvement? _____

V. CAREER NEEDS

Willing to relocate? Yes _____ No _____ If no, explain _____

Amount of overnight travel acceptable? _____

What are your career objectives? _____

VI. OTHER

Do you have the legal right to work for any employer in the United States? Yes _____ No _____

Have you ever been convicted of a crime (other than a minor traffic violation?) Yes _____ No _____ If so, explain _____

I certify that answers given in this Career History Form are true, accurate and complete to the best of my knowledge. I authorize investigation into all statements I have made on this form as may be necessary for reaching an employment decision.

In the event I am employed, I understand that any false or misleading information I knowingly provided in my Career History Form or interview(s) may result in discharge and/or legal action. I understand also that if employed, I am required to abide by all rules and regulations of the employer and any special agreements reached between the employer and me.

Signature

Print name

Date