

TREPANIER



& ASSOCIATES INC

## Employment Application

P.O. Box 2155  
Key West, FL 33045-2155  
Tel: 305-293-8983  
Fax: 305-293-8983

Programs, services and employment are equally available to everyone. Please inform Richard Puente if you require reasonable accommodation for the application or interview.

### PLEASE PRINT

How were you referred to us: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_

Date Available to Start: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Minimum Salary Requirement: \_\_\_\_\_

Are you a citizen  
of the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

If not, are you  
legally allowed to  
work in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever pleaded "guilty," "no contest," or been  
convicted of a crime for which you have not received a pardon. \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, give dates and details: \_\_\_\_\_

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.

Driver's license number: \_\_\_\_\_  
State: \_\_\_\_\_

### Skills

Typing speed \_\_\_\_\_ words per minute. Can you transcribe machine dictation?  
\_\_ Yes \_\_ No      Steno Speed \_\_\_\_\_

Do you have commitments to another employer that might affect your employment with us?  
\_\_\_\_\_

Software with which you are proficient? \_\_\_\_\_  
\_\_\_\_\_

**Educational Data:**

	Name, Address, City, State	Years Completed	Course Type/Major Degree/Certificate
<b>High School</b>	_____		
	_____		
<b>College</b>	_____		
	_____		
<b>Trade, Business or Correspondence</b>	_____		
	_____		
<b>Other</b>	_____		
	_____		

**General Information**

If hired, are you able to provide us with proof of identification and employment eligibility? \_\_\_\_  
Yes \_\_\_\_ No

Person to be notified in case of emergency:

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Relationship \_\_\_\_\_

**Previous Employment over the last seven years (begin with most recent position):**

Dates of Employment:      From \_\_\_\_\_      To \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
and Title: \_\_\_\_\_ and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_\_ Yes \_\_\_\_ No

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_\_\_ Yes \_\_\_\_\_ No

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_\_\_ Yes \_\_\_\_\_ No

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_\_\_ Yes \_\_\_\_\_ No

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_\_\_ Yes \_\_\_\_\_ No

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_\_\_ Yes \_\_\_\_\_ No

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Position(s) Held: \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Starting Salary and Title: \_\_\_\_\_ Ending Salary and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for a reference? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Please attach additional sheets if necessary.**

**References:**

Please provide at least three personal references, omitting former employers and relatives.

Name	Address, City, State	Occupation	Telephone

Please include any additional information you believe would be helpful to us in considering you for employment.

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I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision (including criminal background checks). I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in termination of my employment for cause.

I have read and signed the job description for the position in question. I understand and agree that the job description may be amended from time to time. There is nothing to keep me from fulfilling the duties listed.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_