

TRI-COUNTY PROCESS SERVING LLC
EQUAL OPPORTUNITY EMPLOYER
P.O. BOX 1224, BOISE, IDAHO, 83701 (208) 344-4132 (800) 473-3454

*APPLICATION FOR EMPLOYMENT
 PRE-EMPLOYMENT QUESTIONNAIRE*

DATE: _____

PERSONAL INFORMATION

NAME SOCIAL SECURITY#
 LAST FIRST MIDDLE

PRESENT ADDRESS STREET CITY STATE ZIP

PERMANENT ADDRESS STREET CITY STATE ZIP

ARE YOU 18 YEARS OR OLDER? YES NO PHONE NO.

IN CASE OF EMERGENCY NOTIFY NAME ADDRESS PHONE NO.

EMPLOYMENT DESIRED

POSITION DATE YOU CAN START SALARY DESIRED

ARE YOU EMPLOYED NOW? IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?

EVER APPLIED TO THIS COMPANY BEFORE? WHEN?

WHO REFERRED YOU TO THIS COMPANY: EMPLOYMENT AGENCY NEWSPAPER ADVERTISEMENT
STATE EMPLOYMENT OFFICE COLLEGE PLACEMENT SERVICE
WALK-IN FRIEND OTHER: _____

EDUCATION

SCHOOL LEVEL	NAME & LOCATION	YEARS ATTENDED	GRADUATE? Y/N	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDANCE SCHOOL				

GENERAL

SPECIAL TRAINING, CERTIFICATE OR LICENSE

PRESENT OR LAST EMPLOYER

NAME		ADDRESS		
STARTING DATE	LEAVING DATE			
MONTH	YEAR	MONTH	YEAR	
WEEKLY STARTING SALARY		WEEKLY FINAL SALARY		

JOB TITLE

MAY WE CONTACT YOUR SUPERVISOR?

NAME AND TITLE OF SUPERVISOR

PHONE NUMBER

DESCRIPTION OF WORK

REASON FOR LEAVING

PRESENT OR LAST EMPLOYER

NAME		ADDRESS		
STARTING DATE	LEAVING DATE			
MONTH	YEAR	MONTH	YEAR	
WEEKLY STARTING SALARY		WEEKLY FINAL SALARY		

JOB TITLE

MAY WE CONTACT YOUR SUPERVISOR?

NAME AND TITLE OF SUPERVISOR

PHONE NUMBER

DESCRIPTION OF WORK

REASON FOR LEAVING

REFERENCES: NAME THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

1. Do you have a reliable vehicle? If so, please describe year, make and model.

2. Do you have a valid auto insurance policy?

3. Do you have any mental or physical impairment that may prevent you from performing the job you are applying for?

4. Are you able to work evenings, mornings during the normal work week and weekends?

5. Have you ever been convicted of a crime? If yes, please explain.

6. Do you have experience working independently? If so explain.

7. How would you describe your time management and organizational skills?

8. What are your short-term personal and professional goals? (1-3 years)

9. What are your long-term personal and professional goals? (3-8 years)

10. Are you familiar with the Boise area?

11. What hobbies/interests do you have?

12. What attributes do you have that would benefit Tri-County?

13. Why should we hire you?

AUTHORIZATION

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. TRI-COUNTY MAY ALSO CONDUCT A BACKGROUND CHECK TO INCLUDE A CREDIT CHECK WITH MY INFORMATION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

DATE

SIGNATURE
