



12 Church Street
Ballston Spa, NY 12020
(518) 309-3540

Employee Application

Name: _____

Address: _____

Phone #: _____

Position applying for: _____

Education: _____ (High School)

_____ (College)

Previous Experience

Name of business: _____

From _____ to _____ Position held: _____

Supervisor: _____ Salary: _____

Name of business: _____

From _____ to _____ Position held: _____

Supervisor: _____ Salary: _____

Name of business: _____

From _____ to _____ Position held: _____

Supervisor: _____ Salary: _____

References

Name: _____

Address: _____

Phone #: _____ How long have you known this person? _____

Name: _____

Address: _____

Phone #: _____ How long have you known this person? _____

Name: _____

Address: _____

Phone #: _____ How long have you known this person? _____

Where would you like to be in 1 year? 5 years?

Please tell us about yourself?

Signature

Date