



TOTAL EMPLOYEE LEASING
EMPOWERING YOU TO GET BACK TO BUSINESS

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Employment Application

| EDUCATION | Institution Name | City, ST | Degree Receive | Date Completed |
|----------------------------------|-------------------------|-----------------|-----------------------|-----------------------|
| High School | | | | |
| University/College | | | | |
| University/College | | | | |
| Military, Business, Trade, Other | | | | |

| WORK HISTORY | Most Recent/Current | Previous Position 1 | Previous Position 2 | Previous Position 3 |
|---------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| Previous Employer | | | | |
| City, ST | | | | |
| Position Held | | | | |
| Supervisor Name | | | | |
| Supervisor Phone | | | | |
| Start Date | | | | |
| Starting Salary | | | | |
| End Date | | | | |
| Ending Salary | | | | |
| Reason for Leaving | | | | |

SPECIAL SKILLS AND QUALIFICATIONS

PROFESSIONAL REFERENCES

List the names, addresses and phone numbers of three (3) professional references.

1. _____
2. _____
3. _____

PLEASE READ THE FOLLOWING STATEMENTS BEFORE SIGNING BELOW

The facts set forth in my application are true and complete. I authorize the investigation of all statements contained in this application and hereby authorize my former employers to furnish all information pertaining to my work record. I hereby release my former employers from all liability on account of furnishing such information. I understand that false statement, omission or misleading statements on this application shall be considered sufficient cause for refusal to hire or dismissal that I agree that my employer shall not be held liable in any respect if my employment is terminated because of such omissions or false or misleading statements. Total Employee Leasing is hereby authorized to investigate my employment history, including the contacting of the employers listed previously.

 Signature

____/____/____
 Date