

770 5th St. NW Apt. 1201, Washington, DC 20001. USA

CAREERS@AMERICANGLOBALMARINE.INFO

Application For Employment

DATE: NAME: _____Last First Middle PRESENT ADDRESS: City State Zip Code PERMANENT ADDRESS: Citv State Zip Code PHONE NUMBER: ____ MOBILE NUMBER: DATE OF BIRTH: ____ DO YOU HAVE WORKING PAPERS? YES NO HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? YES NO IF YES, EXPLAIN: **EMPLOYMENT DESIRED** STARTING DATE: EXPECTED SALARY: POSITION: ARE YOU EMPLOYED NOW? YES NO IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? ? YES NO EVER APPLIED TO THIS COMPANY BEFORE? YESNOIF YES, WHERE: WHEN:___ **EDUCATION** NAME OF LOCATION/ADDRESS YEAR ATTENDED DEGREE(S) INSTITUTION **OBTAINED/ SUBJECT STUDIED** HIGH SCHOOL COLLEGE TRADE, CORRESPONDENCE /BUSININESS SCHOOL SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK:

MILITARY SERVICE:

RANK: _____ DISCHARGE STATUS ____

REFERENCES: GIVE THE NAMES AND ADDRESSES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME		ADDRESS	OCCUPATION		YEARS ACQUAINTED	
1.						
2.						
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3.						
		NY, WE ARE DEDICATED TO A POLICY OF NON DNAL ORIGIN, DISABILITY, MARITAL STASTU				
FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)						
DATE	NAM	IE AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING	
(MONTH & YEAR)						
FROM:						
TO:						
WORK PERFORMED:						
FROM						
ТО						
WORK PERFORMED:					1	
FROM						
ТО						
WORK PERFORMED:						
BELOW, PLEASE PROVIDE A LIST OF PEOPLE AND NUMBER WE CAN REACH IN CASE OF EMERGENCY.						
NAME		RELATIONSHIP	CONTACT	NUMBER	ADDRESS	
1.						
2.						
I HEREBY GIVEN AUTHORITY TO CHECK THE REFERENCES GIVEN IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR WILL NOT BE INTERPRETED IN MY FAVOR.						
DATE:	E: SIGNATURE:					