

## Employment Application

PERSUNAL III	IFORIVIA ITON								
LAST	FIRST		MIDDLE	SOCIAL SECURITY #		DATE			
PRESENT STREET ADDRESS				CITY, STATE			ZIP CODE		
DAYTIME PHONE EVENING PHONE				POSITION DESIRED			DATE YOU CAN START		
JOB AVAILAB	ILITY				_				
	Mon	Tues	Wed	Thui	-	Fri	5	Sat	Sun
Day									
Night									
	convicted of a fe	you be able to es		ht to work ir YES	i the U.S.		bb?	YES	NO
Have you ever I If yes, please e		YES NO	)						
REFERENCES	(GIVE BELOW THE NA	MES OF THREE PERSOI	NS NOT RELATED T	O YOU WHOM Y	ou have kn	NOWN AT LEAST O	NE YEAR )		
Name		Addres	Address & Phone Numl		ber O		Occupation		Years Acquainted
EDUCATION	NAME & ADD	RESS OF SCHOOL	DATES	ATTENDED	D	DATE GRADUATED		SUBJECT(s) STUDIED	
High School									
College or University									
Trade, Business or Correspondence									



EMPLOYMENT HISTORY (LIST YOUR LAST THREE EMPLOYERS, STARTING WITH MOST RECENT.)						
May we contact your present employer? YES NO						
COMPANY NAME	TELEPHONE					
ADDRESS	EMPLOYED - (MONTH & YEAR)					
NAME OF SUPERVISOR	HOURLY PAY					
JOB TITLE - DESCRIBE YOUR WORK	REASON FOR LEAVING					
COMPANY NAME	TELEPHONE					
ADDRESS	EMPLOYED - (MONTH & YEAR)					
NAME OF SUPERVISOR	HOURLY PAY					
JOB TITLE - DESCRIBE YOUR WORK	REASON FOR LEAVING					
COMPANY NAME	TELEPHONE					
ADDRESS	EMPLOYED - (MONTH & YEAR)					
NAME OF SUPERVISOR	HOURLY PAY					
JOB TITLE - DESCRIBE YOUR WORK	REASON FOR LEAVING					
Have you worked for Winger's previously? YES NO						
If so, where?	When?					
I certify that the information provided in this application by me is correct to the best of deliberate falsification of this information is grounds for denial of employment or immerabove to give you any and all information concerning my previous employment and any pertinent in and release all parties of all liability for any damage that may result from furnishing information to employment application or in the granting of an interview creates an employment contract between the providing of any benefit. If an employment relationship is established, I understand that I have and that Winger's retains the same right.	diate dismissal. I authorize the reference listed iformation they may have, personal or otherwise, you. I understand that nothing contained in this it Winger's and myself for either employment or for					
Signature of applicant	Date					

<sup>\*</sup>It is Company policy to hire only individuals authorized to work in the U.S.
\*Winger's is an equal opportunity employer and it complies with all discrimination laws. Information requested on this application will not be used for any purpose prohibited by law.