

MERIT CORPORATION

Please print neatly!

PERSONAL

NAME			DATE	
STREET ADDRESS		CITY	STATE	ZIP
HOME TELEPHONE ()	MESSAGE TELEPHONE ()			
ARE YOU A U.S. CITIZEN OR DO YOU HAVE THE LEGAL RIGHT TO WORK IN THE U.S.? ___ Yes ___ No				
HAVE YOU EVER BEEN EMPLOYED AT THE MERIT CORPORATION BEFORE? ___ Yes ___ No			IF YES, GIVE DATES OF EMPLOYMENT	
DO YOU HAVE ANY PHYSICAL CONDITION OR HANDICAP WHICH MAY LIMIT YOUR ABILITY TO PERFORM THE JOB FOR WHICH YOU ARE APPLYING? ___ Yes ___ No			IF YES, PLEASE DESCRIBE SUCH CONDITION OR HANDICAP	
HAVE YOU EVER BEEN CONVICTED OF A FELONY? ___ Yes ___ No		IF YES, DESCRIBE NATURE OF CRIME, DATE AND PLACE OF CONVICTION, AND DISPOSITION OF CASE		

WORK PREFERENCES

POSITION DESIRED OR AREA OF INTEREST		SECOND CHOICE		
DO YOU HAVE ANY RESTRICTIONS OR OBLIGATIONS THAT WOULD PREVENT YOU FROM: WORKING OVERTIME: ___ Yes ___ No WORKING WEEKENDS? ___ Yes ___ No		ARE THERE ANY HOURS OR DAYS YOU ARE RESTRICTED FROM WORKING?		
DO YOU PREFER TO WORK PART TIME? ___ Yes ___ No IF YES, LIST TIMES AND DAYS THAT YOU PREFER.		DATE AVAILABLE	SALARY EXPECTED	

EDUCATION

SCHOOL OR INSTITUTION	NAME AND ADDRESS OF SCHOOL	MAJOR	UNITS OR YEARS COMPLETED AND GRADE AVERAGE	DEGREES OR DIPLOMA
HIGH SCHOOL				
COLLEGE				
COLLEGE				
OTHER				
SPECIAL ABILITIES AND SKILLS		PROFESSIONAL CERTIFICATES OR LICENSES HELD		
EXTRACURRICULAR ACTIVITIES		PRESENT COMMUNITY AND PROFESSIONAL AFFILIATIONS		
DATES OF U.S. MILITARY SERVICE		BRANCH	HIGHEST RANK HELD	RESERVE STATUS
U.S. MILITARY DUTIES		SPECIAL TRAINING		

REFERENCES

LIST PERSONAL CHARACTER REFERENCES WHO ARE NOT RELATIVES OR WORK REFERENCES

NAME	ADDRESS	CITY	STATE	ZIP	TELEPHONE	OCCUPATION	YEARS KNOWN
					()		
					()		
					()		

**AN EQUAL OPPORTUNITY EMPLOYER
EMPLOYMENT HISTORY**

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PLEASE READ CAREFULLY: Begin with present or most recent employer and list all jobs you have held for at least the past five years. Include summer and part-time jobs.

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EMPLOYER'S NAME	NAME OF IMMEDIATE SUPERVISOR		PHONE ()	TITLE/DUTIES
STREET ADDRESS			DATES OF EMPLOYMENT	
CITY	STATE	ZIP CODE	WEEKLY SALARY	REASON FOR LEAVING

2

EMPLOYER'S NAME	NAME OF IMMEDIATE SUPERVISOR		PHONE ()	TITLE/DUTIES
STREET ADDRESS			DATES OF EMPLOYMENT	
CITY	STATE	ZIP CODE	WEEKLY SALARY	REASON FOR LEAVING

3

EMPLOYER'S NAME	NAME OF IMMEDIATE SUPERVISOR		PHONE ()	TITLE/DUTIES
STREET ADDRESS			DATES OF EMPLOYMENT	
CITY	STATE	ZIP CODE	WEEKLY SALARY	REASON FOR LEAVING

4

EMPLOYER'S NAME	NAME OF IMMEDIATE SUPERVISOR		PHONE ()	TITLE/DUTIES
STREET ADDRESS			DATES OF EMPLOYMENT	
CITY	STATE	ZIP CODE	WEEKLY SALARY	REASON FOR LEAVING

5

EMPLOYER'S NAME	NAME OF IMMEDIATE SUPERVISOR		PHONE ()	TITLE/DUTIES
STREET ADDRESS			DATES OF EMPLOYMENT	
CITY	STATE	ZIP CODE	WEEKLY SALARY	REASON FOR LEAVING

6

EMPLOYER'S NAME	NAME OF IMMEDIATE SUPERVISOR		PHONE ()	TITLE/DUTIES
STREET ADDRESS			DATES OF EMPLOYMENT	
CITY	STATE	ZIP CODE	WEEKLY SALARY	REASON FOR LEAVING

MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? Yes___ No___	IF NOT, LIST BY NUMBER WHICH ONE(S) YOU DO NOT WISH US TO CONTACT.
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READ CAREFULLY, DATE AND SIGN: I certify that all statements given on this application are correct and understand that falsification, omission, or misrepresentation in this or any other personnel record may result in my dismissal. I authorize my former employers and other individuals to give information concerning me, whether or not it is part of their written record, and I release them and their companies from any liability whatsoever. I understand that the above noted reference inquiries will be kept confidential and will not be released to persons outside of Merit Corporation without my written consent.

DATE: _____ SIGNATURE: _____

We appreciate your interest and time you have taken to prepare this application. The Merit Corporation is an equal opportunity employer and always hires the best qualified individual for the job, based upon job related qualifications and regardless of race, color, creed, sex, national origin, age, handicap, or other protected group under state, federal or local law.

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