

**GLENN'S, INC.**  
Employment Application

APPLICANT INFORMATION													
Last Name			First Name			M.I.		Date					
Street Address						Apartment/Unit #							
City				State				ZIP					
Phone				E-mail Address									
Date Available			Social Security No.			Desired Salary							
Position Applied for													
Are you a citizen of the United States?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>		NO <input type="checkbox"/>
Have you ever worked for this company?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?					
Have you ever been convicted of a felony or misdemeanor?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain					
EDUCATION													
High School			Address										
From		To	Did you graduate?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree			
College			Address										
From		To	Did you graduate?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree			
Other			Address										
From		To	Did you graduate?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree			
REFERENCES													
<i>Please list three professional references.</i>													
Full Name				Relationship									
Company				Phone		( )							
Address													
Full Name				Relationship									
Company				Phone		( )							
Address													
Full Name				Relationship									
Company				Phone		( )							
Address													

<b>PREVIOUS EMPLOYMENT</b>											
Company					Phone	( )					
Address					Supervisor						
Job Title				Starting Salary	\$			Ending Salary	\$		
Responsibilities											
From		To		Reason for Leaving							
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>						
Company					Phone	( )					
Address					Supervisor						
Job Title				Starting Salary	\$			Ending Salary	\$		
Responsibilities											
From		To		Reason for Leaving							
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>						
Company					Phone	( )					
Address					Supervisor						
Job Title				Starting Salary	\$			Ending Salary	\$		
Responsibilities											
From		To		Reason for Leaving							
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>						
<b>MILITARY SERVICE</b>											
Branch					From		To				
Rank at Discharge					Type of Discharge						
If other than honorable, explain											
<b>FEEDBACK</b>											
How did you hear about our job opening? <input type="checkbox"/> Newspaper <input type="checkbox"/> Internet <input type="checkbox"/> Other _____											
If newspaper, which newspaper? <input type="checkbox"/> Merchandiser <input type="checkbox"/> Lebanon Daily <input type="checkbox"/> Patriot News <input type="checkbox"/> Paxton Herald <input type="checkbox"/> Community Courier <input type="checkbox"/> Other _____											
If Internet, which website? <input type="checkbox"/> www.GlennsInc.com <input type="checkbox"/> PA Career Link <input type="checkbox"/> Other _____											
<b>DISCLAIMER AND SIGNATURE</b>											
I certify that my answers are true and complete to the best of my knowledge. <b>ADDITIONALLY, I AUTHORIZE GLENN'S INC. TO PERFORM A CRIMINAL HISTORY CHECK AS WELL AS A DRIVING RECORD CHECK. PLEASE FILL IN THE FOLLOWING FORM; THE INFORMATION WILL BE USED FOR THE SOLE PURPOSE OF PERFORMING A CRIMINAL HISTORY CHECK AND DRIVING RECORD CHECK:</b>											
DOB: ____ / ____ / ____ STATE OF DRIVERS LICENSE: ____ DRIVERS LICENSE NUMBER: _____											
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.											
Signature								Date			