

Yacht Works, Inc. P.O . Box 199 Sister Bay, WI 54234 920-854-2124 <u>service@yachtworks.com</u>

Employment Application

		Ар	plicant li	nforma	tion						
Full Name:							Date:				
	Last	Firs	st			M.I.					
Address:	Street Address						Apartment/Unit #				
							,				
						0 / /	710.0 /				
	City					State	ZIP Code				
Phone:				Email							
Date Available: Social Secur			ty No ·			Desired	Salary: \$				
Bato / Wallab							Culury. <u></u>				
Position Appl	ied for:										
YES		YES	NO					NO			
Are you a citi	zen of the United States?			If no	, are you	u authorized to we	ork in the U.S.?				
		YES	NO □								
				n yee,							
Have you eve	er been convicted of a felony?	YES									
If yes, explair	וייי										
Education											
High School:			Address:								
				YES	NO						
From:	To:	Did you	graduate?			Diploma:					
College:			Address:								
·			-								

References

Please list two referen	nces.						
Full Name:			Relationship:				
Company:				Phone:			
Address:							
Full Name:				Relationship:			
Company:				Phone:			
Address:							
	Previous	Employme	ent				
Company:				Phone:			
A ddra a a i		Supervisor:					
Job Title:	Starting	Salary:\$ Ending Salary:\$					
Responsibilities:							
From:	To: Reason for Lea						
		YES	NO				
May we contact your p	revious supervisor for a reference?						
Company:				Phone:			
Job Title:	Starting	Salary: <u>\$</u>		Ending Sa	alary: \$		
Responsibilities:							
From:	То:	Reason for Leaving					
		YES	NO				
May we contact your p	revious supervisor for a reference?						
	Militar	y Service					
Branch:			From:		To:		
Rank at Discharge:		f Discharge:					
<u> </u>			<u> </u>				
	Disclaimer	and Signat	ture				
	ers are true and complete to the best o	-	-				
If this application lead may result in my relea	ls to employment, I understand that fai ase.	lse or mislea	ding informa	ntion in my app	olication or interview		
0.5							