



# FTL Job Application Form

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## Applicant Information:

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

SSN#: \_\_\_\_\_

Drivers License#: \_\_\_\_\_

## Position Information:

Position Applying For: \_\_\_\_\_

Available Start Date: \_\_\_\_\_

Desired Salary: \_\_\_\_\_

Are you legally eligible to work in the country? ( Yes                  No                  )

Have you ever worked for this company before? (Yes                  No                  )

If yes, when? \_\_\_\_\_

## Education:

### High School:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Years Attended: \_\_\_\_\_

Did you graduate? (Yes                  No                  )

**College/University:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Years Attended: \_\_\_\_\_

Did you graduate? (Yes                      No                      )

Degree: \_\_\_\_\_

**Other Education:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Years Attended: \_\_\_\_\_

Did you graduate? (Yes                      No                      )

Degree: \_\_\_\_\_

**Employment History:**

**Most Recent Employer:**

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer? (Yes                      No                      )

**Previous Employer:**

Company Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Start Date: \_\_\_\_\_

End Date: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer? (Yes /No )

**References:**

**Reference 1:**

Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Reference 2:**

Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Reference 3:**

Full Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Skills and Qualifications:**

Relevant Skills: \_\_\_\_\_

Certifications: \_\_\_\_\_

Professional Licenses: \_\_\_\_\_

**Additional Information:**

Why do you want to work for FTL? \_\_\_\_\_  
\_\_\_\_\_

What are your career goals? \_\_\_\_\_

Do you have any special accommodations or needs for the interview or job? \_\_\_\_\_  
\_\_\_\_\_

**Signature:**

I certify that my answers are true and complete to the best of my knowledge.

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: \_\_\_\_\_