

# APPLICATION

# ADMINISTRATIVE / CLERICAL

NAME (LAST) FIRST MIDDLE DATE

STREET ADDRESS APARTMENT NO.

CITY STATE ZIP

HOME PHONE MESSAGE PHONE SOCIAL SECURITY NO.

PERSON TO NOTIFY IN CASE OF EMERGENCY PHONE

ADDRESS CITY STATE ZIP

WHY ARE YOU SEEKING TEMPORARY EMPLOYMENT?

ARE YOU INTERESTED IN PERMANENT?  
 YES  NO

DATE AVAILABLE TO START WORK CIRCLE DAYS AVAIL. DAY HOURS NIGHT HOURS

M T W T F S S

WILL YOU ACCEPT SAME DAY ASSIGNMENT?  
 Y  N

HAVE YOU EVER WORKED FOR A TEMPORARY SVC.?  
 YES  NO

WHICH ONES?

AVAILABLE LONG TERM?  
 YES  NO

NAMES & ADDRESSES OF FIRMS WORKED FOR AS TEMPORARY?

1.

2.

3.

ARE YOU A STUDENT?  YES  NO

DO YOU HAVE USE OF AN AUTOMOBILE?  YES  NO

ARE YOU ON A BUS LINE?  YES  NO

TYPE OF WORK DESIRED

FIRST JOB PREFERENCE:

SECOND JOB PREFERENCE:

THIRD JOB PREFERENCE:

**EDUCATION**

CIRCLE HIGHEST GRADE LAST SCHOOL ATTENDED DEGREE/MAJOR GRADUATED

HIGH SCHOOL 1 2 3 4

COLLEGE 1 2 3 4

HAVE YOU EVER BEEN BONDED?  YES  NO

HAVE YOU EVER BEEN REFUSED BONDING?  YES  NO

ARE YOU BONDABLE NOW?  YES  NO

HAVE YOU EVER BEEN CONVICTED OF A FELONY?  YES  NO

HOW WERE YOU REFERRED?  
 YELLOW PAGES  FRIEND  
 NEWSPAPER  
 OTHER:

	DATES		NAME OF EMPLOYER	ADDRESS	PHONE NUMBER	LAST SUPERVISOR	TYPE WORK	SALARY	REASON RESIGNED
	FROM	TO							
PREVIOUS EMPLOYERS									
LAST POSITION FIRST									

CHECK ONLY SKILLS WHERE YOU HAVE WORK EXPERIENCE. ESTIMATE YOUR SKILL 1 (GOOD) 2 (AVERAGE) 3 (FAIR)

	1			2			3			OTHERS
	1	2	3	1	2	3	1	2	3	
CLERICAL	CODING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BANK TELLER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	COLLATING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CASHIER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	FIGURES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CUST. SVC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	FILING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	INSURANCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	INVENTORY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PERSONNEL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	MAILROOM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LIBRARIAN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	MICROFILM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TELEPHONE:					
	PROOFREAD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SALES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	TELEPHONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SURVEY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
	ADDRESSING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OTHER:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
MISCELL										

CHECK OR LIST EQUIPMENT WITH WHICH YOU HAVE WORK EXPERIENCE				
TYPING	SOFTWARE	OTHER EQUIPMENT	TELEPHONE SYSTEMS	TEST RESULTS
IBM SELECTRIC	ALFA NUMERIC	CALCULATOR	AT&T DEFINITY	CLERK
ELECTRONIC	AMI PRO	DESK TOP COP.	ESSEX	FILE
(CANNON, PAN.)	BASIC	MED. COPIER	EXECUTIVE	TYPING
MEMORY WRTR.	COREL DRAW	(NO SORTING)	ITT	LETTER
(XEROX, PAN., IBM)	D BASE VS	HIGH SPEED	MERLIN	10 KEY
DATA ENTRY	FIRST CHOICE	(COLL. COP.)	MITEL	SPELL
APPLE/MAC	HARVARD GRAPHICS	HIGH CAPAC.	NEC	DATA ENTRY
MACINTOSH	LOTUS 1-2-3	MULTI. FUNCT.	NORSTAR	WORD PROCESS.
LAN/NOVELL	MICROSOFT ACCESS	COLOR COPIER	PANASONIC	ALPHA NUMERIC
IBM-PC	MICROSOFT WINDOWS	PAPER SHRED.	SL-1	ARITHMETIC
DIGITAL	MICROSOFT WORD	BURSTER	SPIRIT	OTHER:
WANG	MICROSOFT WORKS	FOLDER (LTR)	T I E	
DESKTOP PUBLISHING	MICROSOFT EXCEL	MAIL INSERTER	TOSHIBA	
	MICROSOFT POWER POINT	COLLATOR	OTHER:	
	NUTSHELL			
	PAGEMAKER			
	PARADOX			
	QUARK EXPRESS			
	QUATRO PRO			
	WORDPERFECT VS			
	WORDSTAR			
OTHER:				

	1			2			3			OTHERS	
	1	2	3	1	2	3	1	2	3		
BOOKKEEPING	ACCTS. PAY.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ENGINEERING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPEED WRITING	<input type="checkbox"/>	<input type="checkbox"/>
	ACCTS. REC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EXECUTIVE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FAST LONG HAND	<input type="checkbox"/>	<input type="checkbox"/>
	ASSISTANT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LEGAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	STENO SPEED	<input type="checkbox"/>	<input type="checkbox"/>
	BANK RECON.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MEDICAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	COLLECTIONS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	STENO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
	CREDIT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TRANSCRIPTION						
	FULL CHG.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TYPING _____ WPM				FOREIGN LANGUAGE		
	GEN. LEDGER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LETTERS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SPAN.	<input type="checkbox"/>	<input type="checkbox"/>
	PAYROLL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BILLING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FRENCH	<input type="checkbox"/>	<input type="checkbox"/>
	TRIAL BAL.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LABELS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GERMAN	<input type="checkbox"/>	<input type="checkbox"/>
				STATISTIC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	JAPAN.	<input type="checkbox"/>	<input type="checkbox"/>	
				TECHNICAL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	OTHER	<input type="checkbox"/>	<input type="checkbox"/>	

PLEASE ANSWER ALL QUESTIONS BOTH SIDES