



# Versa Corporation

## Application for Employment

### Personal Information

|   |              |                   |
|---|--------------|-------------------|
| Name (First, Middle, Last)                                  |              | Date:             |
| Present Address (Street, City, State, Zip):                 |              |                   |
| Permanent Address (Street, City, State, Zip):               |              |                   |
| Home Phone #  | Cell Phone # | Social Security # |
| State name and relationship of any relatives in our employ: |              | Referred by:      |

### Employment Desired

|  |                                       |
|--|---------------------------------------|
| Position desired::                       | Date you can start:                   |
| Skills:                                  | Wages desired:                        |
| Are you employed now?                    | May we contact your present employer? |
| Have you applied to this company before? | When?                                 |

### Education

| School             | Name and Location | Graduated |    | Major | GPA |
|--------------------|-------------------|-----------|----|-------|-----|
|                    |                   | Yes       | No |       |     |
| High School        |                   |           |    |       |     |
|                    |                   |           |    |       |     |
| College University |                   |           |    |       |     |
|                    |                   |           |    |       |     |
| College University |                   |           |    |       |     |
|                    |                   |           |    |       |     |
| Other (specify)    |                   |           |    |       |     |
|                    |                   |           |    |       |     |

### Other Information

|   |
|---|
| Subjects of special study, training or research:  |
|   |
|   |
|   |
| Activities (exclude organizations, the name or character of which indicates the race, creed, sex, marital status, age, color, or national origin of its members): |
|   |
|   |
|   |

**Former Employers** list the last four starting with the most recent

| Date<br>Month/Year | Name/address/phone | Reason for Leaving | Position |
|--------------------|--------------------|--------------------|----------|
| From:              |                    |                    |          |
| To:                |                    |                    |          |
| From:              |                    |                    |          |
| To:                |                    |                    |          |
| From:              |                    |                    |          |
| To:                |                    |                    |          |
| From:              |                    |                    |          |
| To:                |                    |                    |          |

**References** Give the names of three persons not related to your, whom you have known for at least one year

| Name/address/phone | Business | Years Acquainted |
|--------------------|----------|------------------|
| 1;                 |          |                  |
|                    |          |                  |
| 2.                 |          |                  |
|                    |          |                  |
| 3.                 |          |                  |
|                    |          |                  |

**In case of emergency, notify:**

|      |         |       |
|------|---------|-------|
| Name | Address | Phone |
| Name | Address | Phone |

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, at the discretion of the employer, maybe terminated at any time without any previous notice.

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_



# Versa Corporation

## Employee Information

### Personal Information

|   |              |       |
|---|--------------|-------|
| Name (First, Middle, Last)                    |              |       |
| Present Address (Street, City, State, Zip):   |              |       |
| Permanent Address (Street, City, State, Zip): |              |       |
| Home Phone #                                  | Cell Phone # | Date: |

### Emergency Contact - 1

|   |              |               |
|---|--------------|---------------|
| Name (First, Middle, Last)                  |              | Relationship: |
| Present Address (Street, City, State, Zip): |              |               |
| Home Phone #                                | Cell Phone # | Work Phone #  |

### Emergency Contact - 2

|   |              |               |
|---|--------------|---------------|
| Name (First, Middle, Last)                  |              | Relationship: |
| Present Address (Street, City, State, Zip): |              |               |
| Home Phone #                                | Cell Phone # | Work Phone #  |