



SYNERTECH INCORPORATED

228 Moore Street
Philadelphia, Pennsylvania 19148
215-755-2305
e-mail info@gosynertech.com

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

DATE _____

NAME _____ SS # _____
Last First Middle

PRESENT ADDRESS _____
Street City State Postal Code

PHONE NO. _____ ARE YOU 18 YEARS OR OLDER YES ___ NO ___

DRIVER'S LICENSE NO. _____ IN THE STATE OF _____

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES YES ___ NO ___

DATE OF LAST MEDICAL EXAMINATION _____ ARE COPIES AVAILABLE YES ___ NO ___

HAVE YOU PHYSICAL DEFECTS WHICH PRECLUDE YOU FROM PERFORMING CERTAIN JOBS YES ___ NO ___ If yes describe: _____

EMPLOYMENT DESIRED

POSITION _____ START DATE _____ SALARY DESIRED _____

Will you work overtime Yes___ No___

Will you travel and work out of town Yes___ No___

Do you have an automobile Yes___ No___

Automobile Insurance Yes___ No___

Are you presently employed Yes___ No___

Can we contact your present employer Yes___ No___

EDUCATION

| SCHOOL | NAME/LOCATION | COURSE OF STUDY | YEARS COMPLETED | DEGREE/ DIPLOMA |
|------------|---------------|-----------------|-----------------|-----------------|
| College | | | | |
| High | | | | |
| Elementary | | | | |

CERTIFICATIONS/CERTIFICATES

Please list all Certifications/Certificates that you have acquired:

_____ Certificate # _____ Expiration Date _____

_____ Certificate # _____ Expiration Date _____

_____ Certificate # _____ Expiration Date _____

Do you have copies of the above Certifications/Certificates **Yes**___ **No**___

MILITARY

Complete this section if you served in the U.S. Armed Forces

Branch of Service _____ Period of Active Duty From _____ To _____

Describe your duties _____

PREVIOUS EMPLOYMENT

List all previous employers latest one first.

Company Name _____ Telephone No. _____

Address _____ Date Employed From _____ To _____

Name of Supervisor _____ Salary _____

Job title and duties _____

REFERENCES

(List two (2) personal references/Non-family members)

Name _____ Telephone No. _____

Address _____

Name _____ Telephone No. _____

Address _____

SIGNATURE

The information provided in this Application for Employment is true, correct and complete. If employed, any misstatement or omission of act on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have personal or otherwise and release all parties from all liability for any damage that may result from furnishing same to you.

DATE: _____ SIGNATURE: _____