

# HANDYMAN'S INC.

## EMPLOYMENT APPLICATION

604 East St. Germain St | St. Cloud, MN 56304  
 Phone: 320-640-6685 | Email: [handyoffice@handymansinc.com](mailto:handyoffice@handymansinc.com)

### Applicant Information

Last Name	First	M.I.	Date
Street Address		Apt/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available			Desired Salary

### Position Applied for

Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		

### Education

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

### References

*Please list three professional references.*

Full Name	Relationship						
Company	Phone (    )						
Address							
Full Name	Relationship						
Company	Phone (    )						
Address							
Full Name	Relationship						
Company	Phone (    )						
Address							
Available	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Previous Employment			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Military Service			
Branch		From	To
Rank at Discharge		Type of Discharge	
If other than honorable, explain			
Disclaimer and Signature			
<ul style="list-style-type: none"> <li>I certify that my answers are true and complete to the best of my knowledge.</li> <li>If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</li> </ul>			
Signature		Date	
<p align="center">Please return your application either in person or by email.          604 East St. Germain St   St. Cloud, MN 56304          Phone: 320-640-6685   Email: <a href="mailto:handyoffice@handymansinc.com">handyoffice@handymansinc.com</a></p>			