

Telephone: 647-5683 • www.archwayinc.biz







APPLICATION FOR EMPLOYMENT

Please submit this application to our main office Archway, Inc.,147 Serenu Avenue, Tamuning.

Office Hours: Monday - Friday, 8:30 AM - 5:00 PM (closed noon - 1:00 PM)

APPLICANT INFORMATION												
Name (Last, First, Middle Initial): Date Of Application:												
Phone Number	ers - Home	e:		Woı	k: Cell:							
Email Addres	s:											
Home Addres	s:				Mailing Address (If different from Home Address)							
EMPLOYN												
Position Desired: Date You Can Start:												
Type of Employment Part Time Seasonal Internship												
Availability: Willing to work on holidays and weekends? YES NO Referred By: Preferred Shifts Early Morning Mid-day Afternoon Evening Graveyard												
Times Availal	_	•	,,,,,,,	rady		mig craveye	a i G					
TIME	MONDA	Y	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY		SUNDAY			
FROM												
ТО												
1. Are you currently employed?												
EDUCATION												
SCHOOL NAME & LOCATION					GRADUATED (Y	EAR)	MAJOF	MAJOR SUBJECTS				
GRAMMAR SCHOOL												
HIGH SCHOOL												
COLLEGE/UN	IVERSITY											
OTHER (SPECIFY)												
OTHER IN	FORMA	TIO	N									
Subjects of Special Study or Research Work:												
Special Training:												
Activities (Civi	ic, Athletic, etc):										

DATE (MONTH OF A D)	NAME & AD	DDESS OF EMPLOY	ED.	SALARY		DOCITION	DEACON FOR LEAVING				
DATE (MONTH/YEAR)	NAME & AD	DRESS OF EMPLOY	EK	SAL	ARY	POSITION	REASON FOR LEAVING				
FROM TO											
FROM TO											
FROM TO											
FROM TO											
REFERENCES	GIVE THE NAMES	OF THREE PERSONS NOT	RELATED	TO YOU	WHOM	YOU HAVE KNOWN	AT LEAST ONE YEAR.				
NAME		CONTACT INFORMATION EMAIL ADDRESS/PHONE NUMBER				S ACQUAINTE	BUSINESS				
I acknowledge that all the information provided on my application is true, accurate, and correct. I authorize investigation of all statements contained in this application and understand that any misrepresentation, false information, or omission of facts may result in disqualification from employment opportunity with the Company or, disciplinary action up to and including termination of employment if discovered after I have been hired. Furthermore, I understand and agree that my employment is for no definite period of time and may, at the discretion of the employer or myself, be terminated at any time with or without cause, without any previous notice. I hereby acknowledge that I have read and understood the above statements provided on this application. APPLICANT SIGNATURE:											
APPLICANT - DO NOT WRITE BELOW THIS LINE											
Attempt No.	DATE	TIME		RESPONSE							
1st											
2nd											
3rd											
nterviewed by:						Date:					