



GOLDEN EAGLE MOVING AND STORAGE

NOTICE: APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

APPLICANT INFORMATION			
Last Name		First	M.I. Date
Street Address		Apartment/Unit #	
City		State	ZIP
Phone		E-mail Address	
Date Available	Social Security No.		Desired Salary
Position Applied for Driver <input type="checkbox"/> Helper <input type="checkbox"/>			
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 misdemeanor or a felony?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain
Do you have a valid driver's license?		YES <input type="checkbox"/> NO <input type="checkbox"/>	
If yes, please provide: Driver's License #		Expiration Date:	State of Issue:
License Class: A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/>		Endorsements:	
Have you had any accidents in past three years?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, please explain:
Have you had any moving violations in the past three years?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, please explain:
What is your means of transportation to work?			

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

Employment Application

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Wage \$	Ending Wage \$	
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 Wage \$	Ending Wage \$	
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 Wage \$	Ending Wage \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

REFERENCES	
<i>Please List Three Professional References</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

Employment Application

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
If filling out electronically please sign using only the electronic signature	
Electronic Signature	Printed Name: Last 4 digits of SS# Date:
Signature	

Please fill out this form completely and return it electronically or by mail to: **Golden Eagle Moving and Storage**
2719 W Barry Ave
Chicago, Illinois 60618