

# EMPLOYMENT APPLICATION



marketing  
Concepts/A  
bility  
Commerce

Applicants are  
considered for  
all positions  
without regard

## PERSONAL

Last Name	First	Middle	Date
Present Street Address			Home Phone
City, State, Zip			Business/Message Phone
Previous Street Address			Where you heard about us:
City, State, Zip			
Have you ever applied for		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been employed		<input type="checkbox"/> Yes <input type="checkbox"/> No	Month Year
Are you at least 18 years of age?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If hired, can you provide proof that you are		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted of a felony?		<input type="checkbox"/> Yes <input type="checkbox"/> No	

## EMPLOYMENT

Position Desired	Salary Expected					
Specify hours and days available <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Will you work overtime if asked?		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Date available for work						
Referred by						

## REFERENCES

Give name, address and telephone number for three references who are not relatives or former employers, whom you have known for at least 3 years.

Name and occupation	Address	Telephone

Send Application to:  
130 Lake Ave, PO Box 152  
Spicer, MN 56288  
Telephone 320.796.6245  
Fax 320.796.6036

www.MarketingConcepts.com  
www.AbilityCommerce.com

1300 Park of Commerce  
Delray Beach, FL 33445  
Telephone 561.330.3151  
Fax 561.330.3154

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

<b>EMPLOYER 1</b>	
Company Name	Telephone
Address	Employed (month and year)
Name of Supervisor	Weekly pay Start Last
Job Title	Reason for leaving
Description of Work	
May we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>EMPLOYER 2</b>	
Company Name	Telephone
Address	Employed (month and year)
Name of Supervisor	Weekly pay Start Last
Job Title	Reason for leaving
Description of Work	
May we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>EMPLOYER 3</b>	
Company Name	Telephone
Address	Employed (month and year)
Name of Supervisor	Weekly pay Start Last
Job Title	Reason for leaving
Description of Work	
May we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

<b>EMPLOYER 4</b>	
Company Name	Telephone
Address	Employed (month and year)
Name of Supervisor	Weekly pay Start Last
Job Title	Reason for leaving
Description of Work	
May we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

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**EDUCATION**

High School	City, State	Course of study	Circle year completed			
			9	10	11	12
Technical or trade school	City, State	Course of study				
			1	2	3	4
College/University	City, State	Major	Degree			
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Additional job-related seminars, short courses, workshops, or other educational experiences?

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Please list any job-related clubs

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**SKILLS**

How do you rate your computer knowledge?

IBM	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None	Macintosh	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None
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How do you rate your knowledge of the following software?

Word	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None	Windows2000	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None
Excel	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None	HTML, etc.	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None
Access	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None	Great Plains	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None
Outlook	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None	LAN/WAN	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None
SQL	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None	Illustrator	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None
.NET	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None	Pagemaker	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None
COBOL	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None	Web Develop.	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> None

Please list any other applicable skills or software knowledge that you would like us to consider.

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Signature

Date

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