



Stephens Collision & Glass LLC
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Full Name: _____ Date: _____

Address: _____

Phone Number: _____ Text Y/N Messages Y/N

Email address: _____ Date Available: _____

Position Applying For: _____

Are you a Citizen of the USA Y/N

If No, are you Authorized to work in the USA Y/N

Have you ever been convicted of a felony? Y/N

If yes, explain: _____

Do you have a valid driver's license? Y/N State: _____

Education:

High School: _____ Address: _____

Graduated Y/N When: _____

College: _____ Address: _____

Graduated Y/N When: _____

Other: _____ Address: _____

Graduated Y/N When: _____

Professional References:

Full Name: _____ Phone Number: _____

Company: _____

Full Name: _____ Phone Number: _____

Company: _____

Full Name: _____ Phone Number: _____

Company: _____

Previous Employment:

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Ending Salary: _____

Job Duties: _____

Dates Employed: _____ to _____ Reason for Leaving: _____

May we contact? Y/N

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Ending Salary: _____

Job Duties: _____

Dates Employed: _____ to _____ Reason for Leaving: _____

May we contact? Y/N

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Ending Salary: _____

Job Duties: _____

Dates Employed: _____ to _____ Reason for Leaving: _____

May we contact? Y/N

Experience: (relevant to job applying for)

Painting and Body Experience: _____

Other Relevant Experience: _____

Accounting or Office experience: _____

I certify that my answers are true 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.

Signature: _____ Date: _____