

AME INTL
2347 Circuit Way
Brooksville, FL 34604
Phone : (352)-799-1111
Fax: (352) 799-1112
www.ameintl.net



Application for Employment

Please indicate which position you are applying for

- ☐ Customer Service
☐ Sales
☐ Office/Administration
☐ Warehouse / Shipping

All applicants must pass a pre-employment drug test as a condition of employment. The company will decline to extend an offer of regular employment to any applicant with a verified positive test result.

APPLICATION INFORMATION										DATE:					
Last Name						First				MI					
Street									Apt						
City						State					Zip				
Phone						Email Address									
Date Available						Social Security No.						Desire Salary			
Position & Shift Applied For									Are you 18 yrs or over?			Yes ☐		No ☐	
Are you a citizen of the US?			Yes		No		If No are you authorized to work in the US?			Yes		No			
Have you ever worked for this company?			Yes		No		If so when ?								
Have you ever been convicted of a felony?			Yes		No		If Yes, explain								
EDUCATION															
High School						Address									
Did you graduate?			Yes		No		Degree								
College						Address									
Did you graduate?			Yes		No		Degree								
Other Education (list certificates and or training)															
REFERENCES															
Please list three professional references															
Full Name									Relationship						
Company									Phone Contact			()			
									Email Contact						
Full Name									Relationship						
Company									Phone Contact			()			
									Email Contact						
Full Name									Relationship						
Company									Phone Contact			()			
									Email Contact						

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?									
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?									
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?									
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?									

*Additional employment references may be placed on or attached to the back of this page.

* If professional resume is submitted please attach to the employment application.

DISCLAIMER AND SIGNATURE

“I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentation are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. In consideration of my employment, I agree to the company’s rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company’s option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company.

Signature	Date
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DO NOT WRITE BELOW THIS LINE

Interviewed By:	Date:
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Remarks:

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Neatness:	Ability:
Hired: Y N (circle one)	Position:
Approved:	
Staring Salary:	