



EMPLOYMENT APPLICATION -- CUSTOMER SERVICE REPRESENTATIVE

Please print clearly:

Date: ____ / ____ / ____

Last Name, First, Middle

SSN: ____ - ____ - ____

Address City State Zip

Phone Number Cell Phone Number E-Mail Address

Are you legally eligible for employment in the United States? Yes No

Will you have reliable transportation to and from work at your scheduled times? Yes No

Can you work evenings and weekends? Yes No

Are you older than 18? Yes No If not, birth date _____

Date available for work _____ Desired hours per week ____ Anticipated hourly rate _____

How were you referred to us? _____

Your level of software familiarity: None ← → High

1 2 3 4 5

Microsoft Excel	___	___	___	___	___
Microsoft Word	___	___	___	___	___
Microsoft Outlook	___	___	___	___	___
Microsoft PowerPoint	___	___	___	___	___

Other programs: _____

EDUCATION

	Name and location of school	No. of years attended	Did you graduate?	Area of study/ degree(s) received
High School				
College or University				
Trade or Vocational School				

EMPLOYMENT HISTORY (beginning with the most recent).

Dates Mo/Yr	Employer name, address, & phone number; supervisor's name	Pay Rate	Position & responsibilities	Reason for leaving
From: / To: /				
From: / To: /				
From: / To: /				
From: / To: /				

We may seek a referral from the employers listed above unless you identify below those you do not want us to contact.

Do not contact _____

Reason _____

Which job did you like best? _____

What did you like best about this job? _____

Do you have work experience in customer service, telephone service, or telephone sales? Yes No

Give examples of work experience in dealing with customers or with the public: _____

List other skills or relevant experience you possess: _____

During a 12 month period with your past employer, how many days did you miss work due to illness, injury or family crisis? _____

Have you been convicted of a misdemeanor or felony in the last (7) seven years? Yes No

If yes, please explain: _____

EMPLOYMENT REFERENCES (not friends or family)

Name & Relationship	Address & Phone Number	Business Name	Years Acquainted

Read Before Signing:

I give you my word that the information contained in this application is truthful and complete. I understand that, if employed, falsified statements on this application will be grounds for termination.

I authorize your investigation of the information contained herein. I also authorize you to contact my previous employer(s) (unless listed under "Do Not Contact") and the references listed above. I also authorize these individuals to give you any and all information concerning my previous employment and any relevant information they may have. I release all parties from liability for any damage that may result from furnishing such information to you.

I understand and agree that, if hired, my employment with Storage Express shall be "at-will."

Signature: _____

Date: _____