Date Received:



Return Application to:

MAIL: 1607 Hwy 14 E P.O. Box 8142

Rochester, MN 55903 Email: Katrina@airinsanity.com

## **Application for Employment**

Personal Information							
Name				Socia	I Security Number		
Address		City	State	·	Zip		
Date of Birth	Phone Number	Email Address	·				
If selected for employment are you willing to submit to a pre-employment drug screening test and Background Check? Yes  No  No							
Position							
Position You Are Applying For		Available Start Date			Desired Pay		
Employment Desired							
Monday Tuesda	y Wednesday	Thursday	Friday S	aturday	Sunday		
Education							
School Name	Location	Years Attended	Degree Re	ceived	Major		

Name	Title	Company	any Phone	
ivanie	Title	Company	Filone	
Employment History				
Current/Most Recent Employer (1)			Dates Employed (to-from	
Work Phone	Contact Person	Contact Person		
Address	City	State	Zip	
Employer (2)	Job Title	Job Title		
Work Phone	Contact Person	Contact Person		
Address	City	State	Zip	
Employer (3)	Job Title	Job Title		
Work Phone	Contact Person	Contact Person		
Address	City	State	Zip	
Employer (4)	Job Title		Dates Employed (to-from	
Work Phone	Contact Person	Contact Person		
Address	City	State	Zip	
Employer (5)	Job Title	Job Title		
Work Phone	Contact Person	Contact Person		
Address	City	State	Zip	

Personal Information					
What are your Interests and Hobbies:					
Special skill relevant to position applied for	c (cash handling, computer programs, customer service):				
Signature Disclaimer					
I certify that my answers are true and complete	to the best of my knowledge and authorize Air Insanity, LLC. to contact				
all above listed employer and personal reference	es in consideration for employment.				
If this application leads to employment, I under may result in my immediate release.	stand that false or misleading information in my application or interview				
Name (Please Print)	Signature				
Data					
Date					