IMAGINUITY ENTERPRISES, LLC Employment Application

APPLICANT INFORMATION										
Last Name			First	First			Date			
Street Address							Apartment/Unit #			
City			State	State			ZIP			
Mailing Address, if different										
Home Phone			Position Applied for							
Cell Phone			Desired Salary							
Email Address				Date Available						
Are you a citizen o	of the United Sta	ates? YES 🗌	NO 🗌	If no, are you authorized to work in the U.S.? YES NO						
Have you ever wo	rked for this con	mpany? YES	NO	If so, w	hen?					
EDUCATION			A -l -l							
High School			Address							
From	То		YES	NO 🗌	Degree					
College			Address							
From	То	Did you graduate?	YES 🗌	NO 🗌	Degree					
Other	1		Address							
From	То	Did you graduate?	YES	NO 🗌	Degree					
REFERENCES										
Please list three p	rofessional refer	rences.								
Full Name				Relationship						
Company				F	Phone					
Full Name				F	Relationship					
Company				F	Phone					
Full Name				F	Relationship					
Company					Phone					

PREVIOUS EM	PLOYMENT								
Company		Phone							
Address					Supervisor				
Job Title			Starting Salary	\$		Ending S	alary \$		
Responsibilities									
From	То	Reason for Leaving]						
May we contact your previous supervisor for a reference?					NO 🗆				
Company					Phone				
Address					Supervisor				
Job Title			Starting Salary	\$ Ending			alary \$		
Responsibilities									
From	То	Reason for Leaving	I						
May we contact your previous supervisor for a reference? YES NO									
Company					Phone				
Address					Supervisor				
Job Title			Starting Salary	\$ Ending			alary \$		
Responsibilities									
From	То	Reason for Leaving	J						
May we contact your previous supervisor for a reference? YES NO									
MILITARY SER	VICE								
Branch					From		То		
Rank at Discharge					Type of Discharge				
If other than honorable, explain									
DISCLAIMER AND SIGNATURE									
I certify that my answers are true and complete 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			

Submit Completed Application Mail to: Imaginu

715-356-7778

Imaginuity Enterprises, LLC PO Box 642, Minocqua, WI 54548 Email: imaginuity@outlook.com

In Person: 427 Oneida St, Minocqua OR 21 S Brown Street, Rhinelander