

GENERAL	DATE MO/DAY/YR	LAST NAME	FIRST	MIDDLE	SOCIAL SECURITY #	HOME PHONE	2 Positions best qualified for or interested in: 1. _____ 2. _____	SKILL CODE(S) Do Not Write In This Space		
	HOME ADDRESS				CITY	STATE	ZIP	CELL PHONE	E-MAIL ADDRESS	Licenses/Belts/Certificates
	Are you currently employed? Yes <input type="checkbox"/> No <input type="checkbox"/>	How long have you been looking for a new position?	How many companies have you seen?	If none, why?	Language Abilities:			Hobbies		
	<input type="checkbox"/> Own Home <input type="checkbox"/> Live with Relatives	<input type="checkbox"/> Rent <input type="checkbox"/> Internet site: <input type="checkbox"/> Referred by:	How did you learn of us?	Have you been to other services? Which ones?	Nearest Relative (not living with you): Name/Phone/Where Employed			Willing to relocate? <input type="checkbox"/> Yes <input type="checkbox"/> No Where?		
Branch of Military Service	Rank	Duties	Years	When can you start a new position?	When can you take off work to interview? <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon	What distance are you willing to travel each day?				

EDUCATION	School / University	Location City/State	Graduate?	# Hours to Graduate	Working to finish degree?	Degree	Major	GPA	Awards / Achievements	REFERENCES	Name/Title	Company	Phone Number	
	High School		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N									
	College		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N									
	Graduate Degree or Other		<input type="checkbox"/> Y <input type="checkbox"/> N		<input type="checkbox"/> Y <input type="checkbox"/> N									

SHOW PRESENT OR MOST RECENT EMPLOYMENT FIRST. Your Current Position and Identity Will Be Protected.

From (Mo/Yr)	Name of Company/Division of	Address	City	State	Phone No.	Source used to find position	# of Employees	Sales Volume
To (Mo/Yr)	Position/Title	Compensation Start: End: OT: Bonus: Amt/When	Working Hours/History	Avg OT Hrs/Week	Date/Amount of Last Raise	Supervisor's Name and Title		
Benefit Package: <input type="checkbox"/> Major Medical/Monthly: _____ <input type="checkbox"/> Dental: _____ <input type="checkbox"/> Optical: _____ <input type="checkbox"/> Profit Sharing: Amount _____ <input type="checkbox"/> Pension: Amount _____ <input type="checkbox"/> 401(k) with _____ % match <input type="checkbox"/> Life Insurance								
<input type="checkbox"/> No. of Paid Holidays: _____ <input type="checkbox"/> No. of weeks vacation: _____ <input type="checkbox"/> No. of sick/personal days: _____ <input type="checkbox"/> Credit Union <input type="checkbox"/> Tuition <input type="checkbox"/> Employee Discounts <input type="checkbox"/> Child Care <input type="checkbox"/> Short-term Disability <input type="checkbox"/> Long-term Disability <input type="checkbox"/> Other								

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Reason for leaving or why you desire to leave: <input type="checkbox"/> No future <input type="checkbox"/> Poor working conditions <input type="checkbox"/> Lack of company growth <input type="checkbox"/> Repetitive duties <input type="checkbox"/> Company instability <input type="checkbox"/> Antiquated business attitude <input type="checkbox"/> Poor employer-employee communications <input type="checkbox"/> No merit promotions <input type="checkbox"/> Lack of job security <input type="checkbox"/> No cooperation among employees <input type="checkbox"/> Other	What points are important to you in evaluating a new position?	Are you receiving severance? <input type="checkbox"/> Yes <input type="checkbox"/> No What are you receiving? / When does it end?
Explain in detail your reasons for leaving or wanting to leave this position	What reaction will your current employer have when you give notice?	

From (Mo/Yr)	Name of Company/Division of	Address	City	State	Phone No.	Source used to find position	# of Employees	Sales Volume
To (Mo/Yr)	Position/Title	Working Hours	Compensation Start: End: OT: Bonus:	Supervisor's Name and Title				
Explain in detail your reasons for leaving this position								

Do Not Write In This Space

From (Mo/Yr)	Name of Company/Division of	Address	City	State	Phone No.	Source used to find position	# of Employees	Sales Volume
To (Mo/Yr)	Positions/Titles	Compensation Start: End: OT: Bonus:	Supervisor's Name and Title					

Do Not Write In This Space

Test Scores



Management & Professional Skill Sheet

Only mark job titles in which you have had **ACTUAL JOB EXPERIENCE**.

Last Name	First Name
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	<input checked="" type="checkbox"/> I HAVE DONE THIS JOB	<input type="checkbox"/> MY BEST SKILLS
ACCOUNTING & FINANCE (CL08)		
02 Cost Accounting.....	<input type="checkbox"/>	<input type="checkbox"/>
03 General Accounting.....	<input type="checkbox"/>	<input type="checkbox"/>
04 Corporate Taxes.....	<input type="checkbox"/>	<input type="checkbox"/>
05 Personal Taxes.....	<input type="checkbox"/>	<input type="checkbox"/>
06 Auditor.....	<input type="checkbox"/>	<input type="checkbox"/>
07 Controller.....	<input type="checkbox"/>	<input type="checkbox"/>
08 Financial Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
09 CPA.....	<input type="checkbox"/>	<input type="checkbox"/>
10 Business Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
11 Investment/Portfolio Mgr....	<input type="checkbox"/>	<input type="checkbox"/>
12 Tax Manager.....	<input type="checkbox"/>	<input type="checkbox"/>
13 Financial Mgr/Consultant....	<input type="checkbox"/>	<input type="checkbox"/>
99 Other Accounting.....	<input type="checkbox"/>	<input type="checkbox"/>
SALES/MARKETING (CL09)		
06 General Marketing.....	<input type="checkbox"/>	<input type="checkbox"/>
10 Channel Marketing.....	<input type="checkbox"/>	<input type="checkbox"/>
11 Business to Business Sales..	<input type="checkbox"/>	<input type="checkbox"/>
12 Business to Consumer Sales	<input type="checkbox"/>	<input type="checkbox"/>
13 Brand Manager.....	<input type="checkbox"/>	<input type="checkbox"/>
14 Associate Brand Manager....	<input type="checkbox"/>	<input type="checkbox"/>
15 Product Manager.....	<input type="checkbox"/>	<input type="checkbox"/>
16 Product Development.....	<input type="checkbox"/>	<input type="checkbox"/>
17 Digital Marketing.....	<input type="checkbox"/>	<input type="checkbox"/>
18 CRM Manager / Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
19 VP Marketing.....	<input type="checkbox"/>	<input type="checkbox"/>
20 Director of Marketing.....	<input type="checkbox"/>	<input type="checkbox"/>
21 Marketing Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
22 Category Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
23 Director of Sales/Sales Mgr..	<input type="checkbox"/>	<input type="checkbox"/>
99 Other Sales/Marketing.....	<input type="checkbox"/>	<input type="checkbox"/>
LEGAL (CL06)		
04 Corporate Attorney.....	<input type="checkbox"/>	<input type="checkbox"/>
05 Civil/Criminal Defense Atty..	<input type="checkbox"/>	<input type="checkbox"/>
06 Litigation Attorney.....	<input type="checkbox"/>	<input type="checkbox"/>
07 Intellectual Property (IP) Atty	<input type="checkbox"/>	<input type="checkbox"/>
99 Other Legal Exp.....	<input type="checkbox"/>	<input type="checkbox"/>

	<input checked="" type="checkbox"/> I HAVE DONE THIS JOB	<input type="checkbox"/> MY BEST SKILLS
HUMAN RESOURCES (CL14)		
02 Benefits Coordinator.....	<input type="checkbox"/>	<input type="checkbox"/>
03 HR Manager.....	<input type="checkbox"/>	<input type="checkbox"/>
05 Benefits Administrator.....	<input type="checkbox"/>	<input type="checkbox"/>
06 HR Director.....	<input type="checkbox"/>	<input type="checkbox"/>
07 Recruiting Manager.....	<input type="checkbox"/>	<input type="checkbox"/>
08 Employee Development Dir....	<input type="checkbox"/>	<input type="checkbox"/>
09 Compensation Manager.....	<input type="checkbox"/>	<input type="checkbox"/>
10 Compensation Director.....	<input type="checkbox"/>	<input type="checkbox"/>
11 HR Generalist.....	<input type="checkbox"/>	<input type="checkbox"/>
99 Other Human Resources.....	<input type="checkbox"/>	<input type="checkbox"/>
PUBLIC RELATIONS (CL15)		
01 Corporate Communications..	<input type="checkbox"/>	<input type="checkbox"/>
02 Crisis Communications.....	<input type="checkbox"/>	<input type="checkbox"/>
03 PR Manager.....	<input type="checkbox"/>	<input type="checkbox"/>
04 PR Director.....	<input type="checkbox"/>	<input type="checkbox"/>
05 Mgr Organizational Dvlmt ...	<input type="checkbox"/>	<input type="checkbox"/>
99 Other Public Relations.....	<input type="checkbox"/>	<input type="checkbox"/>
SUPPLY CHAIN / LOGISTICS (CL16)		
01 Demand Planner.....	<input type="checkbox"/>	<input type="checkbox"/>
02 Transportation Planner.....	<input type="checkbox"/>	<input type="checkbox"/>
03 Transportation Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
04 Logistics Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
05 Warehouse Leader.....	<input type="checkbox"/>	<input type="checkbox"/>
06 Warehouse Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
07 Buyer Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
08 Distribution Planner.....	<input type="checkbox"/>	<input type="checkbox"/>
09 CRP Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
10 Inventory Planner.....	<input type="checkbox"/>	<input type="checkbox"/>
11 Inventory Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
12 Purchasing Manager.....	<input type="checkbox"/>	<input type="checkbox"/>
13 VMI Analyst.....	<input type="checkbox"/>	<input type="checkbox"/>
99 Other Supply Chain Exp.....	<input type="checkbox"/>	<input type="checkbox"/>

SOFTWARE SKILLS				
	<input checked="" type="checkbox"/> SOFTWARE I CAN USE	<input type="checkbox"/> MY BEST SKILLS		
COMPUTER SOFTWARE (SW01)				
01 MS Office.....	<input type="checkbox"/>	<input type="checkbox"/>		
02 MS Word.....	<input type="checkbox"/>	<input type="checkbox"/>		
03 WordPerfect.....	<input type="checkbox"/>	<input type="checkbox"/>		
04 Lotus WordPro.....	<input type="checkbox"/>	<input type="checkbox"/>		
05 Lotus Notes.....	<input type="checkbox"/>	<input type="checkbox"/>		
06 Microsoft Outlook.....	<input type="checkbox"/>	<input type="checkbox"/>		
99 Other Word Processing.....	<input type="checkbox"/>	<input type="checkbox"/>		
DATABASE (SW03)				
01 Access.....	<input type="checkbox"/>	<input type="checkbox"/>		
02 ACT.....	<input type="checkbox"/>	<input type="checkbox"/>		
03 Dbase.....	<input type="checkbox"/>	<input type="checkbox"/>		
04 Oracle.....	<input type="checkbox"/>	<input type="checkbox"/>		
06 SY Base.....	<input type="checkbox"/>	<input type="checkbox"/>		
07 People Soft.....	<input type="checkbox"/>	<input type="checkbox"/>		
08 Kronos.....	<input type="checkbox"/>	<input type="checkbox"/>		
09 Macola.....	<input type="checkbox"/>	<input type="checkbox"/>		
10 Microsoft Project.....	<input type="checkbox"/>	<input type="checkbox"/>		
11 Raiser's Edge (non-profit).....	<input type="checkbox"/>	<input type="checkbox"/>		
12 Summation Blaze (legal).....	<input type="checkbox"/>	<input type="checkbox"/>		
13 MediSoft (medical).....	<input type="checkbox"/>	<input type="checkbox"/>		
99 Other Database.....	<input type="checkbox"/>	<input type="checkbox"/>		
SPREADSHEET (SW04)				
01 Excel.....	<input type="checkbox"/>	<input type="checkbox"/>		
02 Lotus.....	<input type="checkbox"/>	<input type="checkbox"/>		
03 Quattro Pro.....	<input type="checkbox"/>	<input type="checkbox"/>		
99 Other Spreadsheet.....	<input type="checkbox"/>	<input type="checkbox"/>		
MACINTOSH VERSIONS (SW06)				
01 Word Processing.....	<input type="checkbox"/>	<input type="checkbox"/>		
02 Desktop Publishing.....	<input type="checkbox"/>	<input type="checkbox"/>		
03 Database.....	<input type="checkbox"/>	<input type="checkbox"/>		
04 Spreadsheet.....	<input type="checkbox"/>	<input type="checkbox"/>		
99 Other Macintosh Software.....	<input type="checkbox"/>	<input type="checkbox"/>		
		FLUENT		
FOREIGN LANGUAGES (CL11)			EDUCATION (ED01)	
01 Spanish.....	<input type="checkbox"/>	<input type="checkbox"/>	01 Associates Degree.....	<input type="checkbox"/>
02 French.....	<input type="checkbox"/>	<input type="checkbox"/>	02 Bachelors Degree.....	<input type="checkbox"/>
03 German.....	<input type="checkbox"/>	<input type="checkbox"/>	03 Masters Degree.....	<input type="checkbox"/>
04 Russian.....	<input type="checkbox"/>	<input type="checkbox"/>	04 PhD.....	<input type="checkbox"/>
05 Italian.....	<input type="checkbox"/>	<input type="checkbox"/>	06 JD.....	<input type="checkbox"/>
06 Mandarin.....	<input type="checkbox"/>	<input type="checkbox"/>	07 Military Service.....	<input type="checkbox"/>
99 Other Language.....	<input type="checkbox"/>	<input type="checkbox"/>		

