

# The Quality Group

Please use blue or black ink only

**PTP    Perm    Temp**

Date	How did you hear of us?	Internet Friend	Website Newspaper	Passing By Used Before	Car: Yes    No Yr:          Make	<b>CI</b>	
Name				Social Security Number		Alien Number	
Primary Phone Number		Cell Number		Alternative Phone Number		Eligible for: (Please circle)    Bonding    DMV Record Drug Test    Credit Check	
Email				Street Address /Mailing Address			
City			State		Zip		
Position Desired 1st			2nd		Desired Salary		Least Accepted

## Education

High School, City, State	Degree	Year
College, City, State	Diploma	Year
Special Training, City, State	Certificate	Year

## Employment

Dates	Company Name, City, State (most recent position listed first)	Line of Business	Position	Salary	Reason for Leaving
1.					
2.					
3.					
4.					
5.					

## Skills (Please check)

Computer Software			General		Office		Machinery			
<input type="checkbox"/>	Microsoft Word	<input type="checkbox"/>	<input type="checkbox"/>	QuickBooks	<input type="checkbox"/>	Telemarketing	<input type="checkbox"/>	Accounting	<input type="checkbox"/>	Forklift
<input type="checkbox"/>	Excel	<input type="checkbox"/>	<input type="checkbox"/>	Internet	<input type="checkbox"/>	CSR	<input type="checkbox"/>	GL Bookkeeping	<input type="checkbox"/>	CNC
<input type="checkbox"/>	PowerPoint	<input type="checkbox"/>	<input type="checkbox"/>	FrontPage	<input type="checkbox"/>	Switchboard	<input type="checkbox"/>	A/P	<input type="checkbox"/>	Machinist
<input type="checkbox"/>	Access	<input type="checkbox"/>	<input type="checkbox"/>	Graphics	<input type="checkbox"/>	Data Entry	<input type="checkbox"/>	A/R	<input type="checkbox"/>	CDL License
<input type="checkbox"/>	Outlook	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	Collections	<input type="checkbox"/>	Payroll	<input type="checkbox"/>	

## Additional Information

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*All Positions Are Employer Fee Paid*