

+(501) 613-3745 +(501) 622-3745

Alpha Centauri St. Kontiki, San Ignacio Cayo, Belize C.A.

EMPLOYMENT APPLICATION

PLICANT INFORMATION			DATE:	
FULL NAME:				DD/MD/YY
FIRST	M.I.	LAST		
ADDRESS:				
STREET NAME / AREA	VILLAGE / TOWN / CI	ГҮ	DISTRICT	
GENDER: MALE FEMALE SOCIAL	SECURITY NO.:		DATE OF BIRTH:	DD/MD/YY
SOCIAL STATUS: ☐ MARRIED ☐ SING	GLE COMMON-LAW	I		וויןטאיןטט
CONTACT NO.:	EMERGENCY (CONTACT NAME:	NAME	_
EMERGENCY CONTACT NO.:	SALARY EXPEC	TATION:	OX. OR RANGE	-
POSITION APPLYING FOR: ☐ OFFICE ADI	MIN. STAFF 🗌 SUPERVIS HELPER 🗌 MANUFACTUR		T WAREHOUSE	
HIGHEST EDUCATION: HIGHSCHOOL PENDING			ACHELOR'S □MASTER'S □ IN PROGRESS □ ON-HOL	D
EMAIL DOCUMENTS : APPLICATION L (Email to jobs@proimports.inbze.com)	ETTER □RESUME □PO	LICE RECORD CO	PY SSB CARD REFERENCE L	ETTER
EDIATE PREVIOUS EMPLOYMENT:				
COMPANY:		F	PHONE:	
ADDRESS:	SUPERVISOR:			
JOB TITLE:	<u> </u>	SALARY:		
RESPONSIBILITIES:				
TIME WORKED: FROM: T	O:	REASON FO	R LEAVING:	
CAN WE CONTACT YOUR PREVIOUS EMPL	OYER FOR A REFERENCE	? □YES □NO		
I hereby certify that the information promise misleading information in my application			n grants me employment, I un	derstand that fals
PRINT NAME	SIGNATURE		DATE (DD/MM/YY)	



- +(501) 613-3745 +(501) 622-3745
- Alpha Centauri St. Kontiki, San Ignacio Cayo, Belize C.A.

OFFICIAL USE ONLY

APPLICANT ACCEPTED FOR INTERVIEW: ☐YES ☐NO	
OBSERVATIONS:	
RECOMMENDATION:	
ADDITIONAL DOCUMENTS:	
EMPLOYED: YES NO PRO IMPORTS LTD. H8	Y MANUFACTURING LTD.
IF EMPLOYED: START DATE:DD/MM/YY	STARTING SALARY:
APPROVED:	DATE:
SUPERVISOR	DD/MM/YY
FINAL APPROVED: OWNER/DIRECTOR	DATE: