

APPLICATION FOR EMPLOYMENT

This application is confidential and must be filled out in your own handwriting

November 2 1956

DATE

I hereby make application for employment; the following questions being answered by me without reservation or concealment of facts. I agree, if engaged, to comply with the rules of the house, and it is understood and agreed that when my services terminate at any time, salary due will be pro rata according to my weekly salary up to such time.

Full Name Mrs. Carole Jeanne McBlonnell
Residence _____ Phone _____
Social Security No. _____ Place of Birth? Santa Clara, California
Age? 22 Married? Yes Single? _____ Divorced? _____ Widow? _____
Date of Birth? _____
Are you living with parents, relatives, or boarding, or do you keep house? Rental
Is anyone dependent upon you for support? No
How long have you lived in the State? Twenty Two Years - Native Californian
With what line of work or merchandise are you most familiar? I'm most familiar with the line of ~~work~~ selling clothes and also what ever else that would be expected concerning the job I believe I'm most fitted for.
What position do you think you are best fitted to fill? Salesgirl
What is the extent of your education? Tenth Grade (third year of high school)
In what subject did you rank best? Math
By whom were you last employed? Mr. Long Wages received? \$ 36.04
Were you ever dismissed? No If so, by whom? _____
Have you a relative now in our employ? No
Have you any other income? No
Have you any physical defects? No
Are you a United States Citizen? Yes

LAST PLACE EMPLOYED:

Name of employer Mr. Long
Address 13th Street, Vallejo California
Length of time employed? 2 weeks Date left? _____
Salary received? \$ 36.04 Nature of work? Checking Clerk
Reason for leaving? Moved out of district and working hours (6.P.M - 2: A.M.)

SECOND TO LAST PLACE EMPLOYED:

Name of employer _____
Address _____
Length of time employed? _____ Date left? _____
Salary received? _____ Nature of work? _____
Reason for leaving? _____

THIRD TO LAST PLACE EMPLOYED:

Name of employer _____
Address _____
Length of time employed? _____ Date left? _____
Salary received? \$ _____ Nature of work? _____
Reason for leaving? _____

Give name and address of parents, nearest relative or friend whom you would wish to notify in case of sickness.

Name Mrs. Carole J. McBlonnell
Address _____

NOT TO BE FILLED OUT BY APPLICANT.

Began work _____ Salary \$ _____ Engaged by _____