

FOR OFFICE USE ONLY

Application Filed _____
Application Accepted _____
Clock No. _____

EMPLOYMENT APPLICATION

(If applicant is employed this becomes a permanent record as some of this information may be wanted for Unemployment Insurance and Old Age Pension records.)

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Dept.
Occupation
Rate

PRINT NAME IN FULL

Bradley LAST

David FIRST

Ray MIDDLE

PHONE

ADDRESS CITY San Francisco STATE Calif

IF MARRIED - GIVE WIFE OR HUSBAND'S FULL NAME _____ LAST FIRST MIDDLE

SOCIAL SECURITY ACCOUNT NO. _____ REGISTERED FOR DRAFT? _____ PRESENT DRAFT CLASSIFICATION _____

YOUR DRAFT SERIAL NO. _____ NO. OF YOUR DRAFT BOARD _____ LOCATED AT CITY _____ STATE _____

MALE FEMALE MARRIED SINGLE WIDOW (ER) DIVORCED CHILDREN

AGE 23 DATE OF BIRTH WEIGHT 205 HEIGHT 6'1" HEALTH Good

OWN HOME LIVE WITH PARENTS ROOM

YEARS IN COUNTY _____
YEARS IN STATE _____

DEPENDENTS NO EDUCATION 12 Grade

TYPE OF WORK DESIRED _____ WAGES EXPECTED _____

TRADE OR OCCUPATION _____ APPRENTICESHIP SERVED _____

EMPLOYED AT PRESENT? NONE HOW LONG SINCE LAST EMPLOYMENT? 4/8/55

PREVIOUSLY EMPLOYED HERE? Gryson FROM 875 Market St TO DEPT. 86

WHAT PHYSICAL DEFECTS HAVE YOU? NONE

ARE YOU RELATED TO ANYONE IN OUR EMPLOY? (Who and How) NO

BANK ACCOUNTS: _____ INSURANCE CARRIED: LIFE \$ 10,000 HEALTH \$ _____ ACCIDENT \$ _____

EVER BEEN BONDED, AND FOR WHAT AMOUNT \$ NO BY WHOM EMPLOYED AT TIME? _____

PREVIOUS EMPLOYMENT (Last position first)

	From	To	Name and Address of Employer	Position	Rate of Pay	Reason for Leaving
1.	<u>2 yrs during high school</u>		<u>Webbs V.M. TEXAS</u>	<u>studio</u>		<u>photography darkroom work</u>
2.			<u>BENMAN TEXAS</u>	<u>WAREHOUSE</u>		
			<u>TRUCK OWENS & CO.</u>	<u>TRUCK DRIVER</u>		
			<u>Gryson</u>	<u>inventory</u>		
3.						
4.	<u>April 1955</u>		<u>discharged from</u>	<u>navy</u>		<u>Possum mate</u>

CHARACTER REFERENCES (People who know you well, either personally or in business)

1. NAME _____ ADDRESS _____ PHONE _____

2. NAME _____ ADDRESS _____ PHONE _____

3. NAME _____ ADDRESS _____ PHONE _____

IN CASE OF ACCIDENT NOTIFY: NAME Mrs Lora Mae Bradley

ADDRESS PHONE

SIGNATURE OF APPLICANT

DATE 8/12/55 19