

# Employment Application

Logan & Seiler, Inc.

L&S, Sikeston, & Medical Arts Pharmacies

406 South Main Street Charleston, MO 63834

573-683-3307 | www.semorx.com | contactus@semorx.com

## PERSONAL INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial \_\_\_\_\_ Date \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

United States Citizen: YES or NO

Tobacco User: YES or NO

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## APPLICATION

Position Applying: \_\_\_\_\_

Full or Part Time: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Are you employed now? \_\_\_\_\_ Date available to start work if hired: \_\_\_\_\_

Have you ever worked in a pharmacy? \_\_\_\_\_ If yes, where \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ If yes, please explain \_\_\_\_\_

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## EDUCATION

High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

List all College, business, or technical training schools attended	Dates attended	Major/Course of Study	Degree or Certificate

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## QUALIFICATIONS

On a scale from 1(poor) to 10(excellent), please rate yourself in the following categories

1. Willingness to learn new things: \_\_\_\_\_ Explain \_\_\_\_\_

2. People skills: \_\_\_\_\_ Explain \_\_\_\_\_

3. Computer skills: \_\_\_\_\_ Explain \_\_\_\_\_

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## EMPLOYMENT HISTORY (start with your most recent job)

1) Company name: \_\_\_\_\_ Phone no: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employed from : \_\_\_\_\_ to \_\_\_\_\_ Full time? \_\_\_\_\_ Part time? \_\_\_\_\_ Temp. \_\_\_\_\_ Job  
Title: \_\_\_\_\_ Salary: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

2) Company name: \_\_\_\_\_ Phone no: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employed from : \_\_\_\_\_ to \_\_\_\_\_ Full time? \_\_\_\_\_ Part time? \_\_\_\_\_ Temp. \_\_\_\_\_  
Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

3) Company name: \_\_\_\_\_ Phone no: \_\_\_\_\_  
Address: \_\_\_\_\_  
Employed from : \_\_\_\_\_ to \_\_\_\_\_ Full time? \_\_\_\_\_ Part time? \_\_\_\_\_ Temp. \_\_\_\_\_  
Job Title: \_\_\_\_\_ Salary: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

## REFERENCES

Name	Address	Years Known	Relationship	Telephone No.
1)				
2)				
3)				

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, false/omitted information on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and I release all parties from all liability for any damage that may result from furnishing same to you.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_