

Ask your classmates questions to complete this job application.

APPLICATION FOR EMPLOYMENT

Date:	<input type="text"/>	Position applied for:	<input type="text"/>
Name:	<input type="text"/>	<input type="text"/>	
Address:	<input type="text"/>	<input type="text"/>	
Phone No.	<input type="text"/>		
Sex:	Male: <input type="checkbox"/>	Female: <input type="checkbox"/>	Date of birth: <input type="text"/> <input type="text"/> <input type="text"/>
Social Security Number: <input type="text"/>			
Driver's license:		Yes <input type="checkbox"/>	No <input type="checkbox"/>