

PERSONAL HISTORY FORM

This form should be completed as carefully and as thoroughly as possible.

NAME _____ DATE _____
HOME ADDRESS _____ PHONE _____
BUSINESS ADDRESS _____ PHONE _____
DATE OF BIRTH _____ AGE _____ U.S. CITIZEN _____
POSITION APPLIED FOR _____

WORK EXPERIENCE:

FIRM _____
ADDRESS _____
KIND OF BUSINESS _____ EMPLOYED FROM _____ TO _____
TITLE _____ SALARY RANGE _____
NATURE OF WORK _____
SUPERVISORY RESPONSIBILITY? YES ___ NO ___ NUMBER OF SUBORDINATES _____
IMMEDIATE SUPERIOR _____
WHAT DO YOU LIKE MOST ABOUT YOUR JOB? _____

WHAT DO YOU LEAST ENJOY? _____

REASONS FOR LEAVING OR DESIRING A CHANGE _____

FIRM _____
ADDRESS _____
KIND OF BUSINESS _____ EMPLOYED FROM _____ TO _____
TITLE _____ SALARY RANGE _____
NATURE OF WORK _____

SUPERVISORY RESPONSIBILITY? YES ___ NO ___ NUMBER OF SUBORDINATES _____

IMMEDIATE SUPERIOR _____

WHAT DO YOU LIKE MOST ABOUT YOUR JOB? _____

WHAT DO YOU LEAST ENJOY? _____

REASONS FOR LEAVING OR DESIRING A CHANGE _____

FIRM _____

ADDRESS _____

KIND OF BUSINESS _____ EMPLOYED FROM _____ TO _____

TITLE _____ SALARY RANGE _____

NATURE OF WORK _____

SUPERVISORY RESPONSIBILITY? YES ___ NO ___ NUMBER OF SUBORDINATES _____

IMMEDIATE SUPERIOR _____

WHAT DO YOU LIKE MOST ABOUT YOUR JOB? _____

WHAT DO YOU LEAST ENJOY? _____

REASONS FOR LEAVING OR DESIRING A CHANGE _____

FIRM _____

ADDRESS _____

KIND OF BUSINESS _____ EMPLOYED FROM _____ TO _____

TITLE _____ SALARY RANGE _____

NATURE OF WORK _____

SUPERVISORY RESPONSIBILITY? YES ___ NO ___ NUMBER OF SUBORDINATES _____

WHAT DO YOU LIKE MOST ABOUT YOUR JOB? _____

WHAT DO YOU LEAST ENJOY? _____

REASONS FOR LEAVING OR DESIRING A CHANGE _____

MILITARY EXPERIENCES (WHERE RELEVANT):

IF IN SERVICE, INDICATE: BRANCH _____ DATE DISCHARGED _____

NATURE OF DUTIES _____ DATE ENTERED _____

OVERSEAS _____ TYPE OF DISCHARGE _____

HIGHEST RANK OR GRADE _____ TERMINAL RANK OR GRADE _____

EDUCATION:

GRAMMAR SCHOOL _____

HIGH SCHOOL _____

LOCATION _____ APPROX. _____ GRADUATION _____

GPA DATE

FAVORITE HIGH SCHOOL SUBJECTS _____

SUBJECTS LEAST LIKED _____

EXTRACURRICULAR ACTIVITIES _____

CLASS AND OTHER OFFICES HELD: HONORS AND AWARDS _____

COLLEGE(S) ATTENDED _____ DATES _____

_____ DATES _____

_____ DATES _____

_____ DATES _____

MAJOR FIELD OF STUDY _____ APPROX. GPA _____

MINOR FIELD OF STUDY _____ APPROX. GPA _____

SUBJECTS LEAST LIKED _____

SUBJECTS MOST LIKED _____

DEGREE(S) AND YEAR(S) OBTAINED _____

EXTRACURRICULAR ACTIVITIES _____

SUBSEQUENT COURSES OR STUDIES:

_____ DATES _____

_____ DATES _____

_____ DATES _____

HOW WAS YOUR EDUCATION FINANCED? _____

PART-TIME AND SUMMER WORK _____

FAMILY:

FATHER'S OCCUPATION _____ MOTHER'S OCCUPATION _____

(or former occupation) (or former occupation)

FATHER'S NAME _____ AGE _____ If deceased, give year of death _____

MOTHER'S NAME _____ AGE _____ If deceased, give year of death _____

BY WHOM WERE YOU RAISED? _____

NAMES, AGES, AND OCCUPATIONS OF BROTHERS AND SISTERS

NAME

AGE

OCCUPATON

CURRENT STATUS:

PLACE OF RESIDENCE: Parent's home _____ Apartment _____ Home _____ Other _____

MARITAL STATUS: Single _____ Engaged _____ Married _____ Divorced _____ Other _____

SPOUSE'S OCCUPATION _____ LENGTH OF SERVICE _____

NAME(S) AND AGE(S) OF CHILDREN

AGE _____

AGE _____

AGE _____

AGE _____

AGE _____

AGE _____

ACTIVITIES:

MEMBERSHIP IN CIVIC, PROFESSIONAL OR SOCIAL ORGANIZATIONS _____

HOBBIES AND INTERESTS _____

WHAT TYPE OF VACATION DO YOU PREFER? _____

PHYSICAL DATA:

HEIGHT _____ WEIGHT _____ EYE COLOR _____ HAIR COLOR _____

PERSONAL AIMS AND ASSESSMENT:

WHAT ARE YOUR STRONGEST PERSONAL ATTRIBUTES? _____

IN WHAT AREAS COULD YOU STAND IMPROVEMENT? _____

WHAT ARE YOU LOOKING FOR IN A JOB? _____

WHAT WOULD YOU LIKE TO BE DOING IN 5 YEARS? _____

WHAT WOULD YOU LIKE TO BE DOING IN 10 YEARS? _____

WHAT IS YOUR ULTIMATE CAREER GOAL? _____

IF MONEY WERE NO OBJECT, WHAT WOULD YOU LIKE TO DO WITH YOUR LIFE? _____
