## **APPLICATION FOR EMPLOYMENT**

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)						
Last name	First name	M	Middle name			
Address Number Street	City	State	Zip code			
Telephone number E-mail Address		Social Security Number				
Position applied for:			Date of application			
How did you learn about us?  Advertisement Employment Agency	Friend Relative	Walk-in Other				
Are you a U.S. citizen or an alien Proof of citizenship or immigration sta	n authorized to work in the U.S.? tus will be required upon employment.	_	Yes No			
Can you provide proof that you a	are 18 years of age or older?		Yes No			
Have you ever filed an application of the second of the se	-	Yes No				
Have you ever been employed w If yes, when?		_	Yes No			
Are you currently employed?			Yes No			
If yes, may we contact your pres		Yes No				
On what date would you be avail	lable for work?					
Seeking: Full-time	Part-time Temporary	,				
Hours willing to work:	Days willing to wo	ork:				
Are you willing to travel?		_	Yes No			
Do you have a current, valid, uni	_	Yes No				
Have you ever been convicted of Conviction will not necessarily disqual	f or pled guilty to a criminal offens ify an applicant from employment.	e?	Yes No			
If yes, please explain						

## PREVIOUS EMPLOYMENT EXPERIENCE

List below present and past employers, starting with present or most recent employer. From: \_\_\_\_\_ To: \_\_\_\_ 1. Employer: \_\_\_\_ Address: \_\_\_\_ Telephone: Supervisor: \_\_\_\_ Job title: Reason for leaving: Starting pay: Ending pay: Describe work performed: 2. Employer: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_ Telephone: Address: Job title: \_\_\_\_\_ Supervisor: Reason for leaving: Ending pay: Starting pay: Describe work performed: From: \_\_\_\_\_ To: \_\_\_\_ 3. Employer: \_\_\_\_\_ Address: Telephone: Job title: Supervisor: Reason for leaving: \_\_\_\_ Ending pay: Starting pay: Describe work performed: 4. Employer: \_\_\_\_ From: To: Address: Telephone: Supervisor: \_\_\_\_ Job title: Reason for leaving: Starting pay: Ending pay: Describe work performed:

EDUCATION						
Name of high school						
Did you graduate? If not, years	completed	GED obtained?				
Post-high school technical or trade school?						
Did you receive a certificate of completion?	Type of certif	ficate				
College						
Major course of study	Degree					
Indicate any foreign languages you can speak, read and/or write:						
Speak Read Write						
ADDITIONAL INFORMATION						
Can you operate equipment necessary for performing essential functions of the job for which you are applying? Please specify:						
Describe any specialized training, apprenticeship, skills and extra-curricular activities:						
Training/skills received in the United States military:						
If offered employment, are you willing to submit to which you are applying?  Are you willing to submit to a pre-employment su						

## **Applicant's Statement**

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 30 days from the date I completed it. If I am not hired during that time and I still want to be considered, I will have to reapply.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also that I am required to abide by all rules and regulations of the employer.

I understand that policies and rules that the company has now are not guaranteed and that the company may change its policies and rules at any time.

Signature of applicant	Date
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FOR PERSONNEL DEPARTMENT USE ONLY						
rview Yes	No					
			Date			
Yes	No	Date of Employment				
		Hourly rate/salary				
			Date			
Name and title						
	Yes	YesNo	YesNo Date of Employment Hourly rate/salary			