

Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, martial or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
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How Did You Learn About Us?

() Advertisement () Friend () Walk-In

() Employment Agency () Agency () Other _____

Last Name	First Name	Middle Name
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Address Number	Street	City	State	Zip Code
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Telephone Number(s)	Social Security Number
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DOB	Drivers License #
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If you are under 18 years of age, can you provide required proof of you eligibility to work? () Yes () No

Have you ever filed an application with us before? () Yes () No

If Yes, give date _____

Have you ever been employed with us before? () Yes () No

If Yes, give date _____

Are you currently employed? () Yes () No

May we contact you present employer? () Yes () No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? () Yes () No

Proof of citizenship or immigration status will be required for employment.

On what date would you be available to work? _____

Are you available to work: () Full Time () Part Time () Shift Work () Temporary

Are you currently on "lay-off" status and subject to recall? () Yes () No

Can you travel if a job requires it? () Yes () No

Have you been convicted of a felony within the last 7 years? () Yes () No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

Education

	Elementary School	High School	Undergraduate College/University	Graduate/ Professional
School Name and Location				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				
Describe any special training, apprenticeship, skills, and extra-curricular activities				
Describe any honors you have received				
State any additional information you feel may be helpful to us				
in considering your application.				

Indicate any foreign languages you can speak, read, and/or write			
	FLUENT	GOOD	WRITE
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and offices held.

You may exclude memberships, which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status.

References

Give name, address, and telephone number of three references that are not related to you and are not previous employers.

1. _____
2. _____
3. _____

Have you ever had any job-related training in the United States military?

Yes No

If Yes, please describe _____

Are you physically or otherwise unable to perform the duties of the job for which you are applying?

Yes No

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, handicap, or other protected status.

Employer		Date Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hr. Rate/Salary		
		Start	End	
Job Title	Supervisor			
Reason for Leaving				
Employer		Date Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hr. Rate/Salary		
		Start	End	
Job Title	Supervisor			
Reason for Leaving				

Employer		Date Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hr. Rate/Salary		
		Start	End	
Job Title	Supervisor			
Reason for Leaving				
Employer		Date Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hr. Rate/Salary		
		Start	End	
Job Title	Supervisor			
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

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 shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. 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 Employer may discharge 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 conducted unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the even 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.

(Signature of Applicant)

(Date)

For Personnel Department Use Only

Arrange Interview Yes No

Remarks _____

Employed Yes No Date of Employment _____ Interviewer _____ Date _____

Job Title _____ Hourly Rate/Salary _____ Department _____

By _____
Name and Title Date