

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital 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: _____	
How did You Learn About Us?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk In	
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____	
Last Name: _____		First Name: _____	Middle Name: _____
Address: _____	Number _____	Street _____	City _____
		State _____	Zip Code _____
Telephone Number (s): _____		Social Security Number: _____	

If you are under 18 years of age, can you provide required proof of your 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 your 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 upon employment.

On what date would you be available for work? _____

Are you available to work: Full Time Part Time

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: _____

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Education:

	Name and Location	Graduate?-Degree?	Major/Subjects of Study
High School			
College or University			
Specialized Training, Trade School, etc...			
Other Education			

Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position.

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 numbers of three references who 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

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PREVIOUS EXPERIENCE

Please list beginning from most recent

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

Dates Employed	Company Name	Location	Role/Title

Job notes, tasks performed and reason for leaving:

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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 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 the 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 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.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

DATE OF INTERVIEW _____

REMARKS

EMPLOYED YES NO DATE OF EMPLOYMENT _____

JOB TITLE _____ HOURLY RATE/SALARY _____

BY: _____ DATE _____

NOTES: _____

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