



APPLICATION FOR EMPLOYMENT
AN EQUAL OPPORTUNITY EMPLOYER

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

Name: _____ Date: ____/____/____

Address: _____ City: _____ State: _____ ZIP _____

How long have you lived there? Years: _____ Months: _____

Home phone:()____-____ Work phone:()____-____ Social Security Number:____-____-____

Position for which you are applying: _____

Lowest acceptable wage: \$_____per_____ Date you can start: ____/____/____

Are you available to work: Full-time Part-time Temporary Days Evenings Weekends All

LIST HOURS AND DAYS AVAILABLE TO WORK

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From (time)							
To (time)							

Referred by: Newspaper ad Recruited Walk-in Other, please specify: _____

At any time have you been known by a different name? Yes No Name: _____

Are you either a U.S. citizen or legally eligible to hold employment in the United States? Yes No

Are you at least 18 years old? Yes No If no, birth date: ____/____/____

EDUCATION

Type of School	Name and Address of School	Diploma Degree	Major course Of study
High School	Name: _____	<input type="checkbox"/> Yes	
	Street _____ City _____ State _____ Zip _____	<input type="checkbox"/> No	
College	Name _____	<input type="checkbox"/> Yes	
	Street _____ City _____ State _____ Zip _____	<input type="checkbox"/> No	
Technical, Trade, Grad School, or Other	Name: _____	<input type="checkbox"/> Yes	
	Street _____ City _____ State _____ Zip _____	<input type="checkbox"/> No	

Have you ever been in the Military Service? Yes No If yes, give date and type of discharge: _____

Have you ever been terminated or asked to resign from any job? Yes No

If yes, explain the circumstances: _____

Do you have adequate transportation to and from work? Yes No

List any additional or special education, training, skills or machines operated: _____

Are you physically capable of performing the duties of this job as assigned? Yes No

Have you ever been convicted (found guilty) of attempting or committing any crime other than a minor traffic violation?
 Yes No If yes, when? _____ For what? _____ Explain using additional sheet.

Have you been arrested for any matters for which you are out on bail or your own recognizance pending trial?
 Yes No If yes, when? _____ For what? _____ Explain using additional sheet.

Note: a conviction record will not necessarily bar individuals from employment (You are not required to reveal records which have been judicially expunged, sealed or eradicated.) Other factors will affect the final decision to hire or not to hire.
 (Please continue on reverse side)

List all former and current employers in reverse order. Give present or most recent employer first. Include any periods of unemployment, self-employment, military service, etc. Information provided is subject to verification. Attach additional sheets if necessary.

May we contact your present employer? Yes No

(1)	
Company Name: _____	Position held/Title: _____
Address: _____	City _____ State _____ Zip _____
Dates employed, from: ____/____/____ to: ____/____/____	
Supervisor's Name: _____	Title: _____ Phone Number: _____
Starting rate of pay: \$ _____ per _____ Last rate of pay: \$ _____ per _____	
Responsibilities: _____	
Reason for leaving: _____	
If time elapsed between positions, please explain: _____	
(2)	
Company Name: _____	Position held/Title: _____
Address: _____	City _____ State _____ Zip _____
Dates employed, from: ____/____/____ to: ____/____/____	
Supervisor's Name: _____	Title: _____ Phone Number: _____
Starting rate of pay: \$ _____ per _____ Last rate of pay: \$ _____ per _____	
Responsibilities: _____	
Reason for leaving: _____	
If time elapsed between positions, please explain: _____	
(3)	
Company Name: _____	Position held/Title: _____
Address: _____	City _____ State _____ Zip _____
Dates employed, from: ____/____/____ to: ____/____/____	
Supervisor's Name: _____	Title: _____ Phone Number: _____
Starting rate of pay: \$ _____ per _____ Last rate of pay: \$ _____ per _____	
Responsibilities: _____	
Reason for leaving: _____	
If time elapsed between positions, please explain: _____	

READ CAREFULLY BEFORE SIGNING

I hereby certify, to the best of my knowledge, that the answers given are true and complete. I also understand that an omission or falsification may disqualify me from consideration for employment or may be grounds for my immediate dismissal. I agree to conform to the rules and regulations of the company and, if employed, I understand and agree that my employment is at-will and that no employment contract rights have been created. I also understand and agree that my employment may be terminated at any time with or without cause and with or without advance notice at the option of either the company or myself.

I understand that no supervisor, manager or other representative of the company has any authority to enter into any express or implied contract for employment for any specific period of time. Any agreement contrary to the above must be in writing and expressly state that it is a contract and be signed by the authorized representative of the company. I agree to a physical examination, if requested, and understand that failure to meet any medical and/or health requirements for the position will prevent my employment with the company. I also understand that employment, for certain positions, is conditional upon successful completion of a substance abuse screening test as part of the company's pre-employment policy.

(Applicant's Signature)

Date: _____