



# Application for Employment

We consider applicants for all positions without regard to race, color, religion, gender, 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?<br><input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Walk-in <input type="checkbox"/> Employment Agency<br><input type="checkbox"/> Relative <input type="checkbox"/> Other _____ |                      |

|   |                                      |                     |
|---|--------------------------------------|---------------------|
| Last Name   | First Name                           | Middle Name         |
| Street Address  | City                                 | State      Zip Code |
| Telephone Number(s)   | Social Security Number<br>--      -- |                     |
| Email Address   |                                      |                     |
| If you are 18 years of age, can you provide required proof of your eligibility to work? <input type="checkbox"/> Yes <input type="checkbox"/> No  |                                      |                     |
| Have you ever filed an application with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, give date: _____   |                                      |                     |
| Have you ever been employed with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, give date: _____  |                                      |                     |
| Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No  |                                      |                     |
| May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No  |                                      |                     |
| Are you prevented from lawfully becoming employed in this country because of<br>visa or immigration status? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><i>Proof of citizenship or immigration status will be required upon employment.</i> |                                      |                     |
| On what date would you be available for work? _____   |                                      |                     |
| Are you available to work: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Shift Work <input type="checkbox"/> Temporary   |                                      |                     |
| Are you currently on "lay-off" status and subject to recall? <input type="checkbox"/> Yes <input type="checkbox"/> No   |                                      |                     |
| Can you travel if a job requires it? <input type="checkbox"/> Yes <input type="checkbox"/> No   |                                      |                     |
| Have you been convicted of a felony within the last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><i>Conviction will not necessarily disqualify an applicant from employment.</i>  |                                      |                     |
| If yes, please explain: _____   |                                      |                     |

| <b>Education</b>  | <b>Elementary School</b> |   |   |   | <b>High School</b> |    |    |    | <b>Undergraduate College/Univ.</b> |   |   |   | <b>Graduate/ Professional</b> |   |   |   |
|---|--------------------------|---|---|---|--------------------|----|----|----|------------------------------------|---|---|---|-------------------------------|---|---|---|
| School Name and Location  |                          |   |   |   |                    |    |    |    |                                    |   |   |   |                               |   |   |   |
| Years Completed   | 5                        | 6 | 7 | 8 | 9                  | 10 | 11 | 12 | 1                                  | 2 | 3 | 4 | 1                             | 2 | 3 | 4 |
| Diploma/Degree  |                          |   |   |   |                    |    |    |    |                                    |   |   |   |                               |   |   |   |
| Describe course of study  |                          |   |   |   |                    |    |    |    |                                    |   |   |   |                               |   |   |   |
| Describe any specialized 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               |    |    |    | Fair                               |   |   |   |                               |   |   |   |
| Speak   |                          |   |   |   |                    |    |    |    |                                    |   |   |   |                               |   |   |   |
| Read  |                          |   |   |   |                    |    |    |    |                                    |   |   |   |                               |   |   |   |
| Write   |                          |   |   |   |                    |    |    |    |                                    |   |   |   |                               |   |   |   |

List professional, trade, business or civic activities and offices held.  
*You may exclude memberships which would reveal gender, race, religion, national origin, age, ancestry, or disability or other protected status.*

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**References**

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

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Have you ever had any job-related training in the United States Military?  Yes  No  
 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, which indicate race, color, religion, gender, national origin, disability or other protected status.

|                    |                       |       |                       |
|--------------------|-----------------------|-------|-----------------------|
| <b>1. Employer</b> | <b>Dates Employed</b> |       | <b>Work Performed</b> |
|                    | From                  | To    |                       |
| Address            |                       |       |                       |
| Telephone Numbers  | Hourly Rate/Salary    |       |                       |
| Job Title          | Starting              | Final |                       |
| Reason for leaving |                       |       |                       |
| <b>2. Employer</b> | <b>Dates Employed</b> |       | <b>Work Performed</b> |
|                    | From                  | To    |                       |
| Address            |                       |       |                       |
| Telephone Numbers  | Hourly Rate/Salary    |       |                       |
| Job Title          | Starting              | Final |                       |
| Reason for leaving |                       |       |                       |
| <b>3. Employer</b> | <b>Dates Employed</b> |       | <b>Work Performed</b> |
|                    | From                  | To    |                       |
| Address            |                       |       |                       |
| Telephone Numbers  | Hourly Rate/Salary    |       |                       |
| Job Title          | Starting              | Final |                       |
| Reason for leaving |                       |       |                       |
| <b>4. Employer</b> | <b>Dates Employed</b> |       | <b>Work Performed</b> |
|                    | From                  | To    |                       |
| Address            |                       |       |                       |
| Telephone Numbers  | Hourly Rate/Salary    |       |                       |
| Job Title          | Starting              | Final |                       |
| 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 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 acknowledge that any employment relationship with this Company 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 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 the Company.

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

\_\_\_\_\_  
Applicants for some positions are required to have a driver's license. Please provide the following information:

Are you licensed to drive a car?     Yes    No

Do you have a chauffeur's license?    Yes    No

Driver's License number: \_\_\_\_\_

List the type and occurrence of any moving violations within the last three years (include license suspension).

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## Notes

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