

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
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 Shift Work Temporary
Please check ALL you would consider: 1st shift 2nd shift 3rd Shift

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 _____

We are an Equal Opportunity Employer

Education

	Elementary School					High School				Undergraduate College/University				Graduate/Professional			
School Name 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 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																	

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

You may exclude membership 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 who are not related to you .

1. _____
2. _____
3. _____

Have you ever had any job-related training in the United States military? **Yes** **No**

If Yes, please describe _____

Are you able to perform the duties of the job for which you are applying either with or without reasonable accommodation?

Yes **No**

Employment Experience

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

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
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 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 6 months. 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 acknowledge 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 Human Resource Department use only			
Arrange Interview	Yes	No	
Remarks _____ _____			
			Interview Date _____
Employed	Yes	No	Date of Employment _____
Job Title _____		Hourly/Salary _____	Department _____
By _____			
Name and Title		Date	

Notes _____

