

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 non-job-related medical condition or handicap or any other legally protected status.

(PLEASE PRINT)

Date: _____ Position Applied for: _____

How did you hear about this position: _____

Name: _____

Address: _____

Phone: _____ 2nd Contact Number: _____

Have you ever filed an application with us before? _____ yes _____ no If so, when _____

Have you ever been employed with us before? _____ yes _____ no If so, when _____

Are you currently employed? _____ yes _____ no

May we contact your current 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 able to begin work? _____

Are you available to work: full time _____ part time _____ shift work _____ temporary/seasonal _____

Are you currently on "lay off" status and subject to recall? _____ yes _____ no

Can you travel if the job requires? _____ yes _____ no

Have you been convicted of a felony in the last 7 years? _____ yes _____ no

If yes, explain _____

Education

Name and Location	Years Completed	Did you Graduate?	Course of Study
High School _____			

College/University _____			

Specialized training, apprenticeship, skills and extra-curricular activities: _____

Any additional information you feel may be helpful to us in considering your application:

Describe any honors you have received: _____

Foreign languages that you read, write, or speak: _____

List any 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 phone number of three references who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

Have you ever had job-related training in the United States military? _____ yes _____ no
If yes, 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 which indicate race, color, religion, gender, national origin, handicap or other protected status.

1. Employer _____ Dates employed from _____ to _____
Address _____ Hourly rate/salary starting _____ final _____
Phone _____ Job Title _____
Work Performed _____
Reason for leaving _____

2. Employer _____ Dates employed from _____ to _____
Address _____ Hourly rate/salary starting _____ final _____
Phone _____ Job Title _____
Work Performed _____
Reason for leaving _____

3. Employer _____ Dates employed from _____ to _____
Address _____ Hourly rate/salary starting _____ final _____
Phone _____ Job Title _____
Work Performed _____
Reason for leaving _____

4. Employer _____ Dates employed from _____ to _____
Address _____ Hourly rate/salary starting _____ final _____
Phone _____ Job Title _____
Work Performed _____
Reason for leaving _____

5. Employer _____ Dates employed from _____ to _____
Address _____ Hourly rate/salary starting _____ final _____
Phone _____ Job Title _____
Work Performed _____
Reason for leaving _____

Certifications and Qualifications

Summarize certifications and qualifications acquired from employment or other experience.

Applicant 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.

X _____
Signature of Applicant Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview ____ yes ____ no

Remarks _____

Employed ____ yes ____ no Date of Employment _____ Interviewer _____ Date _____

Hourly Rate/Salary \$ _____ Job Title _____ Department _____

By: _____ Date: _____
Name and Title

Notes: _____

