

# APPLICATION FOR EMPLOYMENT

## An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age or disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Job Applied for \_\_\_\_\_ Today's Date \_\_\_\_\_

Are you seeking: Full-time      Part-time      Temporary      employment? When could you start work? \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Telephone # \_\_\_\_\_

Present Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Are you 18 years of age or older? Yes      No

Social Security # (optional) \_\_\_\_\_ If hired, can you furnish proof you are eligible to work in the U.S.  
Yes      No

Have you ever applied here before?      Yes      No      If yes, when? \_\_\_\_\_

Were you ever employed here?      Yes      No      If yes, when? \_\_\_\_\_

Have you ever been convicted of any law violation (except a minor traffic violation)? Yes      No

If yes, give details \_\_\_\_\_  
( A "Yes" answer does not automatically disqualify you from employment, since the nature of the offense, date, and the job for which you are applying is also considered)

Are you now or do you expect to be engaged in any other business or employment? Yes      No

If yes, please explain \_\_\_\_\_

How many days of work have you missed during the past year? (Exclude absences due to disability or those covered by FMLA.) \_\_\_\_\_

For Driving Jobs ONLY: Do you have a valid driver's license: Yes      No

Driver's License Number \_\_\_\_\_ Class of License \_\_\_\_\_

Have you had your driver's license suspended or revoked in the last 3 years? Yes      No

If yes, give details \_\_\_\_\_

LIST NAME AND ADDRESSES OF SCHOOLS	Number of Years Completed	Diploma/ Degree/ Certificate	Subjects Studied
------------------------------------	---------------------------------	------------------------------------	---------------------

High School or GED: \_\_\_\_\_

College or University: \_\_\_\_\_

Vocational or Technical: \_\_\_\_\_

What Skills or additional training do you have that relate to the job for which you are applying? \_\_\_\_\_

What machines or equipment can you operate that relate to the job for which you are applying? \_\_\_\_\_

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Note: a job offer may be contingent upon acceptable references from current and former employers.

Name of Employer: \_\_\_\_\_ Job Title/ Duties \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Dates of Employment (Mo/Yr): From \_\_\_\_\_ To \_\_\_\_\_ Pay: Start \$ \_\_\_\_\_ Final \$ \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Job Title/ Duties \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Dates of Employment (Mo/Yr): From \_\_\_\_\_ To \_\_\_\_\_ Pay: Start \$ \_\_\_\_\_ Final \$ \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Job Title/ Duties \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Dates of Employment (Mo/Yr): From \_\_\_\_\_ To \_\_\_\_\_ Pay: Start \$ \_\_\_\_\_ Final \$ \_\_\_\_\_

Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Have you worked or attended school under any other name? Yes          No

If yes, give names: \_\_\_\_\_

Have you ever been fired from a job or asked to resign? Yes          No

If yes, please explain: \_\_\_\_\_

Please list three references, not relatives or former employers:

Name	Address	Phone

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organization from any legal liability in making such statements.

I understand that i may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post employment drug screen as a condition of employment if required.

I UNDERSTANT THAT THIS APPLICATION OR SUBSEQUENT EMPLOYEMTN DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOT GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE VEEN HIRED AT THE WILL FO THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUG CAUSE AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature \_\_\_\_\_

Date: \_\_\_\_\_