

APPLICATION FOR EMPLOYMENT

We consider all applicants for all positions without regard to race, color, religion, sex, national origin, ancestry, age, veteran status, disability or any other legally protected status under federal, state, or local law.

(PLEASE PRINT)

POSITION(S) APPLIED FOR:	DATE OF APPLICATION:
HOW DID YOU LEARN ABOUT US?	
<input type="checkbox"/> ADVERTISING	<input type="checkbox"/> WALK-IN
<input type="checkbox"/> EMPLOYMENT AGENCY	
<input type="checkbox"/> FRIEND	<input type="checkbox"/> RELATIVE
<input type="checkbox"/> OTHER: _____	

LAST :	FIRST:	MIDDLE INITIAL:
ADDRESS:		
CITY:	STATE:	ZIP:
HOME PHONE:	CELL PHONE:	

Are you at least 18 years of age? YES___ NO___

Are you legally authorized to work in the U.S.?
(If hired, verification will be required consistent with applicable law.) YES___ NO___

Have you ever filed an application with us before? If yes, give date _____ YES___ NO___

Have you ever been employed with us before? If yes, give date _____ YES___ NO___

Are you currently employed? YES___ NO___ May we contact your present employer? YES___ NO___

On what date would you be available for work? _____

Are you available for work? FULL TIME___ PART TIME___ SHIFT WORK ___

Are you currently on "layoff" 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 past 7 years?

YES___ NO___

(Note: This question does not apply to convictions which have been expunged or sealed by a court. A conviction record will not necessarily be a bar to employment. A conviction which bears a direct relationship to the job may be considered. Consideration also will be given as to the nature and date of conviction and rehabilitation.)

If yes, please describe fully the criminal conviction(s), listing the nature of the offense(s) and your rehabilitation since the conviction(s): _____

EDUCATION

	HIGH SCHOOL	COLLEGE UNIVIVERSITY	GRADUATE PROFFESIONAL
SCHOOL NAME AND LOCATION:			
YEARS COMPLETED:	9 10 11 12	1 2 3 4	1 2 3 4
DEGREE OR CERTIFICATE AWARDED: _____ DESCRIBE COURSE OF STUDY: _____ DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP, OR SKILLS: _____ DESCRIBE ANY HONORS YOU HAVE RECEIVED: _____ STATE ANY ADDITIONAL INFO THAT MAY BE HELPFUL IN CONSIDERING YOU, INCLUDING PROFESSIONAL ASSOCIATION _____ <i>(Applicants may omit information which reveals their race, color, religion, sex, national origin, ancestry, age, disability status, or any other characteristic protected under federal, state, or local law. You may choose to include any job-related experience in the U. S. military or state militia.)</i>			

REFERENCES

GIVE NAME, ADDRESS AND TELEPHONE NUMBER OF THREE PROFESSIONAL REFERENCES WHO ARE NOT RELATED TO YOU AND ARE NOT PREVIOUS EMPLOYERS.

- _____
- _____
- _____

EMPLOYMENT EXPERIENCE

START WITH YOUR PRESENT OR LAST JOB, INCLUDE ANY JOB-RELATED MILITARY SERVICE ASSIGNMENTS AND VOLUNTEER ACTIVITIES. YOU MAY EXCLUDE ORGANIZATIONS WHICH INCLUDE RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, ANCESTRY, AGE, DISABILITY STATUS, OR ANY OTHER CHARACTERISTIC PROTECTED UNDER FEDERAL STATE, OR LOCAL LAW.

EMPLOYER 1:	DATES EMPLOYED <u>FROM</u> <u>TO</u>	HOUR RATE <u>FROM</u> <u>TO</u>
ADDRESS: PHONE NUMBER:		WORK PERFORMED:
JOB TITLE:		SUPERVISOR:
REASON FOR LEAVING:		

EMPLOYER 2:	DATES EMPLOYED <u>FROM</u> <u>TO</u>	HOUR RATE <u>FROM</u> <u>TO</u>
ADDRESS: PHONE NUMBER:		WORK PERFORMED:
JOB TITLE:		SUPERVISOR:
REASON FOR LEAVING:		

EMPLOYER 3:	DATES EMPLOYED <u>FROM</u> <u>TO</u>	HOUR RATE <u>FROM</u> <u>TO</u>
ADDRESS: PHONE NUMBER:		WORK PERFORMED:
JOB TITLE:		SUPERVISOR:
REASON FOR LEAVING:		

EMPLOYER 4:	DATES EMPLOYED <u>FROM</u> <u>TO</u>	HOUR RATE <u>FROM</u> <u>TO</u>
ADDRESS: PHONE NUMBER:		WORK PERFORMED:
JOB TITLE:		SUPERVISOR:
REASON FOR LEAVING:		

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications 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 A "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 WRITNG BY AN AUTHORIZED EXECUTIVE OF THE EMPLOYER.

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 PERSONNEL DEPARTMENT USE ONLY

ARRANGE INTERVIEW ___ YES ___ NO

REMARKS: _____

INTERVIEWER _____ DATE _____

EMPLOYED ___ YES ___ NO DATE OF EMPLOYMENT _____

JOB TITLE _____ HOURLY/SALARY RATE _____

DEPARTMENT _____

BY: _____

NAME

TITLE

NOTES: _____