



Employment Application

We are an Equal Opportunity Employer

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.

Applicant Information		please print			
Last Name	First	M.I.	Date		
Street Address		Apartment/Unit #			
City	State	ZIP			
Phone		E-mail Address			
Date Available	Driver's License #.		Desired Salary		
Position Applied for					
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?		
Have you been convicted of a felony within the last 7 years?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		
<i>Conviction will not necessarily disqualify an applicant from employment.</i>					
Are you currently employed?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
May we contact your present employer?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Are you available to work:	Full-time <input type="checkbox"/>	Part-time <input type="checkbox"/>	Shift work <input type="checkbox"/>	Temporary <input type="checkbox"/>	
Are you currently on "lay-off" status and subject to recall?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Can you travel if a job requires it?				YES <input type="checkbox"/>	NO <input type="checkbox"/>
If you are under 18 years of age, can you provide required proof of your eligibility to work?				YES <input type="checkbox"/>	NO <input type="checkbox"/>



Employment Application

Education					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

Special skills and qualifications

Summarize special job-related skills and qualification acquired from employment or other experience.

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 memberships which would reveal sex, race, religion, national origin, age ancestry, or handicap or other protected status:



Employment Application



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References			
<i>Please list 3 references who are not related to you and are not previous employers.</i>			
Full Name	Relationship		
Company	Phone ()		
Address			
Full Name	Relationship		
Company	Phone ()		
Address			
Full Name	Relationship		
Company	Phone ()		
Address			
Previous Employment			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES NO			
		<input type="checkbox"/>	<input type="checkbox"/>
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES NO			
		<input type="checkbox"/>	<input type="checkbox"/>



Employment Application



Employment Application

Previous Employment continued			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?			
		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Military Service			
Branch		From	To
Rank at Discharge		Type of Discharge	
If other than honorable, explain			
Disclaimer and Signature			
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 application 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, also, that I am required to abide by all rules and regulations of the employer.			
Signature			Date



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FOR PERSONNEL DEPARTMENT USE ONLY			
Arrange Interview	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Remarks			
Interviewer			Date
Employed	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Date of Employment
Job Title			Rate
Department			
By			Date

NOTES