

Application for Employment

We consider applicants for all positions without discrimination based on race, color, religion, creed, gender, national origin, age, marital or veteran status, disability, or any other legally protected status.

(PLEASE PRINT)

Position Applied for	Date of Application		
How did you learn about us?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Walk-In	<input type="checkbox"/> Friend _____
<input type="checkbox"/> Relative _____	<input type="checkbox"/> Internet Site _____	<input type="checkbox"/> Other _____	

Last Name	First Name	Middle Name	
Street Address	City	State	ZIP Code
Telephone Number(s)			
Cell		Other	

If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes

No

Have you ever been convicted of a felony?

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

If No, when? _____

Are you authorized to work lawfully in the United States?

Yes

No

On what date would you be available to work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall?

Yes

No

Can you travel if the job requires?

Yes

No

Have you ever been involuntarily terminated from a job?

Yes

No

If Yes, please explain _____

WE ARE AN AT-WILL, EQUAL OPPORTUNITY EMPLOYER

EDUCATION

	Name and Address of School	Course of Study	Diploma/Degree Level
High School			
Undergraduate College			
Graduate Professional			
Other (Specify)			

Speak, Read and Write Fluently:

English Other: _____

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

EMPLOYMENT

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, disabilities, or other protected status.

	From	To
1. Employer _____		
Address _____		
Telephone Number(s) _____		
Job Title _____		
Reason for Leaving _____		
2. Employer _____		
Address _____		
Telephone Number(s) _____		
Job Title _____		
Reason for Leaving _____		

From _____ To _____

3. Employer _____
Address _____
Telephone Number(s) _____
Job Title _____
Reason for Leaving _____

4. Employer _____
Address _____
Telephone Number(s) _____
Job Title _____
Reason for Leaving _____

If you need additional space, please continue on a separate sheet of paper.

REFERENCES

NAME	TELEPHONE

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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.

I HEREBY UNDERSTAND AND ACKNOWLEDGE THAT, IF HIRED, MY EMPLOYMENT RELATIONSHIP WITH THIS ORGANIZATION WOULD BE OF AN "AT WILL" NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISCHARGE THE EMPLOYEE AT ANY TIME AND FOR ANY OR NO REASON. IT IS FURTHER UNDERSTOOD THAT THIS "AT WILL" EMPLOYMENT RELATIONSHIP MAY NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR 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.

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 Rate/Salary _____

Department _____

Notes: _____