

Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(Please Print)

Position(s) applied for	Pay Expected	Date of Application
How did you learn about us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____
Last Name	First Name	Middle Name
Address	Number	Street
		City
		State Zip Code
Telephone Number(s)		Social Security Number

If you are under 18 years of age, can you provide required proof of eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

If Yes, give date _____

Have you ever been employed with us before? Yes No

If Yes, give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? *Proof of citizenship or immigration status will be required upon employment.* Yes No

On what date would you be available for work? _____

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

Will you work overtime if asked? Yes No

Are you currently on "lay-off" 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 last 7 years? *Conviction will not necessarily disqualify an applicant from employment.* Yes No

If yes, please explain _____

E D U C A T I O N	School	Name and Location of School	Course of Study	# of Years Completed	Did you Graduate?	Degree or Diploma
	Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Business/Trade Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Elementary				<input type="checkbox"/> Yes <input type="checkbox"/> No	

S P E C I A L I Z E D S K I L L S	Check Skills / Equipment Operated		
	Production / Mobile Machinery (list):	Other (list):	
			Computer <input type="checkbox"/>
			Fax <input type="checkbox"/>
			Ten Key <input type="checkbox"/>
			Postage Meter <input type="checkbox"/>
			Microsoft Excel <input type="checkbox"/>
			Microsoft Word <input type="checkbox"/>

State any additional information you feel may be helpful to us in considering your application.

Summarize special job-related skills acquired from employment or received in the United States military.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

Employer - 1		Dates Employed		Work Performed
		From	To	
Address				
Telephone Numbers		Hourly Rate / Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer - 2		Dates Employed		Work Performed
		From	To	
Address				
Telephone Numbers		Hourly Rate / Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer - 3		Dates Employed		Work Performed
		From	To	
Address				
Telephone Numbers		Hourly Rate / Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer - 4		Dates Employed		Work Performed
		From	To	
Address				
Telephone Numbers		Hourly Rate / Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer - 5		Dates Employed		Work Performed
		From	To	
Address				
Telephone Numbers		Hourly Rate / Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

REFERENCES

1	()	
	Name	Phone #
	Address	
2	()	
	Name	Phone #
	Address	
3	()	
	Name	Phone #
	Address	

APPLICANT'S STATEMENT

The information provided in this Application of Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand, also, that I am required to abide by all rules and regulations of the employer.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

Signature
Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Employed Yes No Date of Employment _____

Job Title _____ Hourly Rate / Salary _____ PC _____

By _____ Date _____
Name & Title

NOTES _____

