



Application for Employment

We consider applicants for all positions without regard to race, color, religion, gender, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or disability, or any other legally protected status.			
Position(s) Applied For	Salary Requirements	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	City	State	Zip Code
Telephone Number(s)		Social Security Number	

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

Have you ever completed 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 current employer? Yes No

Are you prevented from lawfully becoming employed in this Country because of Visa or immigration Status? (Proof of Citizenship or immigration 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 Shift Work Temporary Overtime

Are you currently on a "lay-off" status and subject to recall? Yes No

Can you travel, if the position requires it? Yes No weekends? Yes No

Have you ever been convicted of a felony within the last seven (7) years? (Conviction will not necessarily disqualify applicant from employment) Yes No

If yes, please explain _____

Do any of your friends or relatives work here? Yes No

If yes, please identify _____



Education	Elementary School	High School	Undergraduate College/University	Graduate Professional
School Name and Location				
Years Completed	<input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
Diploma/Degree				
Course of Study				

Describe any specialized training, Apprenticeship, skills, and extra-Curricular activities.	
Describe any honors you received.	
State any additional information you feel that may be helpful to us in considering your application.	

List professional, trade, business or civil activities and offices held. You may exclude memberships that would reveal gender, race, religion origin, age, ancestry or disability or other legally protected status:

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REFERENCES

Personal (not relatives or co-workers)

Name	Address	Phone Number

Professional (not co-workers or employers)

Name	Address	Phone Number



Have you ever had any job-related training in the US Military? Yes No

If yes, please describe:

Are there any reasons you may have difficulty in performing any of the job duties explained to you and for which you have applied? Yes No

If yes, please describe:

EMPLOYMENT EXPERIENCE

Start with present or last job, including job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disability or other protected status.

Employer #1	Address	Phone Number
Dates Employed	From	To
Hourly Rate/Salary	Starting	Final
Job Title / Work Performed	Supervisor	Reason for Leaving

Employer #2	Address	Phone Number
Dates Employed	From	To
Hourly Rate/Salary	Starting	Final
Job Title / Work Performed	Supervisor	Reason for Leaving



Employer #3	Address	Phone Number
Dates Employed	From	To
Hourly Rate/Salary	Starting	Final
Job Title / Work Performed	Supervisor	Reason for Leaving

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experiences.

I verify that the answers given herein are true and complete to the best of my knowledge and 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 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 the "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by any authorized executive of the 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 _____