

Application for Employment

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

(PLEASE PRINT)

Position(s) Applied For

Date of Application

How Did You Learn About Us?

Advertisement

Relative

Inquiry

Employment Agency

Friend

Other

Last Name

First Name

Middle Name

Address

City

State

Zip Code

Phone Number

E-mail

Social Security Number (Voluntary)

Best time to contact you at home is:

If you are under 18 years of age, can you provide required proof of your 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

Do any of your friends or relatives, other than spouse, work here?

Yes No

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

Date available for work

What is your desired salary range?

Are you available to work:

Full Time

(please indicate shift)

Part Time

(please indicate)

Temporary

(please indicate dates available

 -)

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

Yes No

Can you travel if a job requires it?

Yes No

Education

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

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

Describe any job-related training 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. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

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

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

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

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

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

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status

Applicant's Statement

I certify that answers given herein are true and complete.

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 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 the 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 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