



APPLICATION FOR EMPLOYMENT

Name _____

Date _____

Position(s) Desired:

1. _____

2. _____

3. _____

ALL APPLICATIONS ARE ACTIVE FOR 60 DAYS

APPLICATION FOR EMPLOYMENT

DATE: _____ POSITION APPLIED FOR: _____

Referred by: _____ Date Available for Work: _____

INSTRUCTIONS: Please read carefully. Every item on this form must be answered to the best of your ability. Please print and use a pen. Your qualifications will be carefully reviewed and you will be given thorough consideration for any suitable vacancy. Upon employment, this application will become part of your permanent record with This Employer. Keep this in mind as you complete it. **Special Note:** You are not required to supply any information that is prohibited by Federal, State, or Local law. We are an Equal Opportunity Employer. **This Employer does not discriminate on the basis of race, color, religion, sex, national origin, citizenship, age, marital status, or disability. You may request assistance in completing this application.**

PERSONAL

Name _____ Telephone Number: () _____
First M.I. Last

Street _____ Box _____ City _____ ST _____ Zip _____

Previous Address _____ Social Security Number _____

If younger than 18, state age here _____ Are you legally entitled to work in the United States? yes no

Have you ever been convicted of a felony? _____ If yes, explain: _____

Conviction of a crime will not necessarily be a bar to employment. Factors such as age at the time of the offense, type of offense, remoteness of the offense in time and rehabilitation will be taken into account in determining effect on suitability for employment.

Answer these for all positions requiring the use of a vehicle:

Have you ever been convicted of a moving traffic violation? yes no If yes, list all here _____

Have your driving privileges ever been revoked or suspended? yes no If yes, list all here _____

Do you have a Commercial driving license? yes no

***Compliance with I-9 requirements is mandatory, upon employment*

EDUCATION

High School (Name and Address) _____

Did you graduate? _____ If no, last grade completed _____ G.E.D. Obtained? _____ Grade Average _____

Colleges (Name and Address) _____

Colleges (Name and Address) _____

Did you graduate? _____ If no, number of hours completed _____ Grade Point Average _____ Degree _____

Major _____ Minor _____ If attending, date of graduation _____

Other Education _____

Awards, Honors, Leadership Roles: _____

MILITARY not applicable

List service in U.S. Military: From _____ to _____ Branch _____

Rank at Discharge _____ Military experience that may be applicable: _____

MOS: _____

GENERAL EMPLOYMENT INFORMATION

1. List here all of the equipment with which you have experience and training. (Examples: cash register, small tools, forklift, word processor, calculator, computers, etc.): _____

2. Salary Expected _____ hour _____ or week _____ Number of hours you are available per week? _____ No preference

3. Type of Employment sought: regular full time regular part time

4. Which of these times are you available: Days: yes no Nights: yes no
Weekends: yes no Holidays: yes no

3. Indicate hours you are available to work on the following days (or check : Anytime, if you have no restrictions)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____
<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime	<input type="checkbox"/> Anytime

7. Are you able and willing to perform the essential functions of the job for which you are applying, including travel, if necessary? yes no don't know

*If no, indicate reason: need different hours need different days need more training

Other, (explain) _____

8. Have you ever been employed by this company? yes no If yes, list date(s): _____

EXPERIENCE

List below all present and past employment, beginning with your most recent employer

1. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: Quit Discharge Retired
Dates Employed _____ to _____ Lay off Why? _____
For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

2. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: Quit Discharge Retired
Dates Employed _____ to _____ Lay off Why? _____
For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

3. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: Quit Discharge Retired
Dates Employed _____ to _____ Lay off Why? _____
For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

4. Employer _____ Starting Salary _____ per hour or week
Address _____ Last Salary _____ per hour or week
Kind of Business _____ Supervisor _____
Job Title _____ Reason for Leaving: Quit Discharge Retired
Dates Employed _____ to _____ Lay off Why? _____
For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

5. Employer _____ Starting Salary _____ per hour or week
 Address _____ Last Salary _____ per hour or week
 Kind of Business _____ Supervisor _____
 Job Title _____ Reason for Leaving: Quit Discharge Retired
 Dates Employed _____ to _____ Lay off Why? _____
 For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

6. Employer _____ Starting Salary _____ per hour or week
 Address _____ Last Salary _____ per hour or week
 Kind of Business _____ Supervisor _____
 Job Title _____ Reason for Leaving: Quit Discharge Retired
 Dates Employed _____ to _____ Lay off Why? _____
 For Job Reference, call _____ at _____
 Please do not contact this employer. Why not? _____

In the following space, please describe briefly why you are applying for this position:

CONDITIONS OF EMPLOYMENT

- I. The facts as stated on this application are true and correct. I understand that, if employed, false statements on this application may cause my immediate dismissal.
- II. I authorize this employer to obtain such background and personal information on me as it deems necessary to verify that the information I have supplied is true and accurate and to determine my fitness for this job. I hold harmless anyone who is asked to provide such information to this Employer. A copy of this authorization is as valid as the original.
- III. I understand that I may be required to work overtime as a condition of being employed.
- IV. In consideration of my employment, I agree to conform to the rules and regulations for employees. I understand I am an employee at will, and that this application is not a contract of employment with this Employer and that my employment and compensation can be terminated, with or without cause, at anytime, at the option of either this Employer or me. I understand that no representative of this Employer has any authority to enter into any verbal agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and that no document, policy or practice of this Employer may change the foregoing unless it is expressly titled (Employment Agreement" and signed by both myself and an officer of this Employer).
- V. I understand that I may be required to submit to a test for illegal drug use prior to any offer for employment, a medical examination after a conditional offer of employment, and test for fitness and/or substance abuse after employment, if not prohibited by law.
- VI. Upon separation of employment, I authorize this Employer to withhold from my final pay check any monies owed to them by me.

Date _____ Signature _____