APPLICATION FOR EMPLOYMENT

An EQUAL OPPORTUNITY EMPLOYER

Date of Application   **Position(s) Applied For** _____

Name   **Telephone** _____
    Last   First   Middle

Address
    Number Street   City   State Zip Code

Email _____

	Yes	No
If employed and under 18 years of age, can you furnish a work permit?	Yes	No
Have you filed an application with this company before? If yes, give date:	Yes	No
Have you ever been employed with this company before? If yes, give date:	Yes	No
Are you currently employed?	Yes	No
If yes, 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?

When are you available to work?   Full Time   Part Time   Flextime   Any

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EDUCATION

	High School				Vocational Training				College/ University				Graduate/ Professional			
School Name																
Years Completed	9	10	11	12	1	2	3	4	1	2	3	4	1	2	3	4
Diploma/Degree																
Describe Course of Study																
Describe Specialized Training, Skills, Apprenticeship, and Extra-Curricular Activities																

Honors Received:

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

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List professional, trade, business or civic activities and offices held. (You may exclude memberships that would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status.)

Give name, address and telephone numbers of three references who are not related to you and are not previous employers.

1. Name: Telephone:

    Address:

2. Name: Telephone:

    Address:

3. Name: Telephone:

    Address:

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. (You may exclude organization names that would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status.)

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

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

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

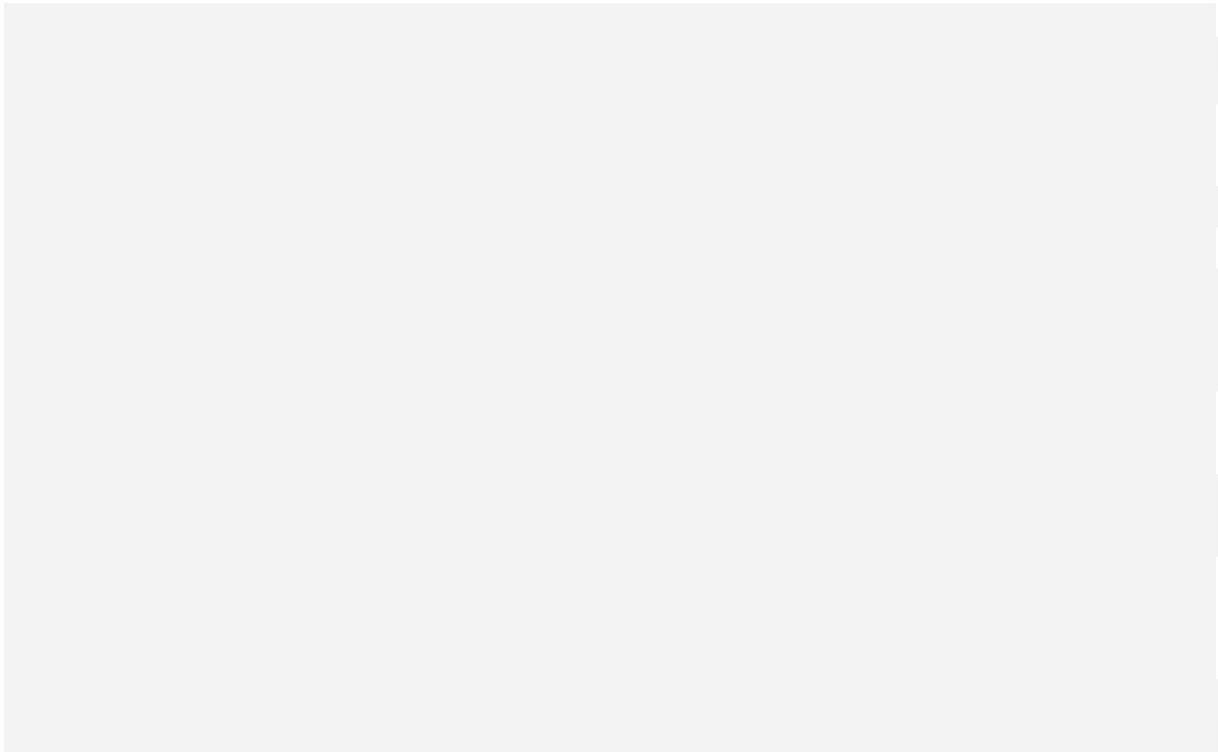| 4.	Employer:		Dates Employed	
	Address:		From:	To:
	Phone Number:		Hourly Rate/Salary	
	Job Title:	Supervisor:	Starting:	Final:
	Work Performed:			
	Reason for Leaving:			

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<u>Special Skills and Qualifications</u>
Summarize special skills and qualifications acquired from employment experience or education.
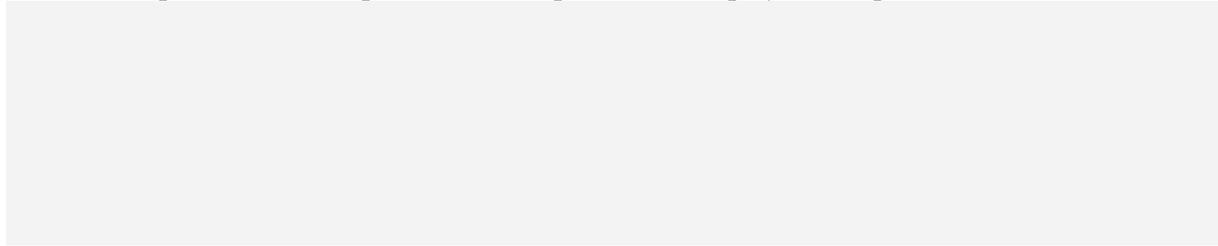
NOTES

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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.

This application for employment shall be considered active for a period of time not to exceed 180 days. If I wish to be considered for employment beyond this time period, I understand that I need to inquire as to whether or not applications are being accepted at that time.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and me in writing.

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

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