



Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability or veteran status.

Name: Last _____ First _____ MI _____ Date _____

Street Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Social Security #: _____

Position applied for: _____

How did you hear of this opening? _____

When can you start? _____ Desired wage: _____

Are you an U.S. citizen or otherwise authorized to work the U.S. on an unrestricted basis? [You may be required to provide documentation.]

Yes

No

Are you looking for full time employment?

Yes

No

If no, what hours are you available: _____

Are you willing to work swing shift?

Yes

No

Are you willing to work graveyard?

Yes

No

Have you ever been convicted of a felony? [This will not necessarily affect your application.]

Yes

No

If yes, please describe conditions: _____

Education:	School Name & Location:	Year	Major	Degree
High School:	_____	_____	_____	_____
College:	_____	_____	_____	_____
Other Training:	_____	_____	_____	_____

In addition to your work history, are there any other skills, qualifications or experience that we should consider? _____

Employment History: Start with most recent employer.

Company Name: _____
Street Address: _____ Telephone: _____
Date Started: _____ Starting Wage: \$ _____ Starting Position: _____
Date Ended: _____ Ending Wage: \$ _____ Ending Position: _____
Name of Supervisor: _____ May we contact? ____Yes ____No
Responsibilities: _____
Reason for Leaving: _____

Company Name: _____
Street Address: _____ Telephone: _____
Date Started: _____ Starting Wage: \$ _____ Starting Position: _____
Date Ended: _____ Ending Wage: \$ _____ Ending Position: _____
Name of Supervisor: _____ May we contact? ____Yes ____No
Responsibilities: _____
Reason for Leaving: _____

Company Name: _____
Street Address: _____ Telephone: _____
Date Started: _____ Starting Wage: \$ _____ Starting Position: _____
Date Ended: _____ Ending Wage: \$ _____ Ending Position: _____
Name of Supervisor: _____ May we contact? ____Yes ____No
Responsibilities: _____
Reason for Leaving: _____

Attach additional information if necessary.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements in this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior education and employment history.

I understand that employment at this company is "at will" which means that either myself or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president has any authority to alter the forgoing.

Signature: _____ Date: _____