

APPLICATION FOR EMPLOYMENT

PLEASE PRINT

Position (s) Applied for: _____ Date of Application: _____

Name: _____
 LAST FIRST MIDDLE

Address: _____
 STREET CITY STATE ZIP

Telephone: _____ SSN: _____

If you are under 18, can you furnish a work permit? _____ Yes _____ No

Have you ever been employed here before? _____ Yes _____ No

Are you legally eligible for employment in this country? _____ Yes _____ No
(Proof of U.S. citizenship or immigration status will be required upon employment.)

Date available for work: _____

Type of employment desired: _____ Full-time _____ Part-time _____ Temporary

Are you able to meet the attendance requirements of the position?: _____ Yes _____ No

Have you been convicted of a felony in the last seven (7) years? _____ Yes _____ No
(Such conviction may be relevant if job related, but does not bar you from employment.)

If yes, please explain: _____

Driver's License number (if required by job): _____ State: _____

SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you for work with our company.

EMPLOYMENT HISTORY

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience.

From	To	Employer	Telephone
Job Title		Address	
Immediate Supervisor and Title		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary Start \$ _____ per _____ Final \$ _____ per _____	

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EDUCATIONAL BACKGROUND

Name and Location	Years Completed	Did You Graduate?		Course of Study
High School				
College		Major	Degree	
Other				

REFERENCES

Name	Telephone	Years Known
	Area Code ()	
	Area Code ()	
	Area Code ()	

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the Employer’s service if I have been employed.

I give the Employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Employer is an Equal Opportunity Employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant’s consideration for employment on a basis prohibited by local, state or federal law.

The Employer believes that all employees are to be treated with respect and dignity. Sexual harassment or harassment for any reason, such as that based on race, color, religion, national origin, age, marital status or physical handicap, by a supervisor or another employee will not be tolerated under any circumstances, and can lead to disciplinary action, up to and including discharge.

The application is current for only 60 days. At the conclusion of this time, if I have not heard from the Employer, and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that, just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause, and without prior notice. I understand that no representative of the Employer has the authority to make any assurance to the contrary.

Signature of Applicant: _____ Date: _____