



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. Date of birth and social security numbers are needed to complete background search.

First Name: _____ Middle Initial: _____ Last Name: _____

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

Social Security Number: _____ Date of Birth: _____

Are you a United States citizen or otherwise authorized to work in the United States on an unrestricted basis? (You may be required to provide documentation) Yes No

Have you ever been convicted of a felony? (This will not necessarily affect your application) Yes No

If yes, please describe conviction and other conditions.

EMPLOYMENT POSITION

Position applied for: _____ How did you hear of this opening? _____

Are you presently employed? Yes No

May we contact your present employer? Yes No

Are you looking for full-time employment? Yes No

If no, please check your available days/hours.

_____ Sunday

_____ Thursday

_____ Day Shift

_____ Monday

_____ Friday

_____ Afternoon Shift

_____ Tuesday

_____ Saturday

_____ Evening Shift

_____ Wednesday

_____ Night Shift

Are you willing to work different shifts? Yes No

Are you willing to work nights? Yes No

Are you willing to travel? Yes No

Date you can start: _____ Expected starting hourly wage: _____

Please list all applicable skills (May attach a resume with applicable skills):

EDUCATION

	School Name	Location	Years Attended	Major	Diploma or Degree
High School					
College					
College					
Other Training					

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

REFERENCES

List three professional/personal references, not related to you, who have known you for more than one year.

Name: _____ Phone: _____ Years Known: _____

Address: _____

Name: _____ Phone: _____ Years Known: _____

Address: _____

Name: _____ Phone: _____ Years Known: _____

Address: _____

EMPLOYMENT HISTORY (Start with most recent employer)

Company Name: _____ **Phone:** _____

Address: _____

Date Started: _____ **Starting Position:** _____

Date Ended: _____ **Ending Position:** _____

Name of Supervisor: _____ **May we contact?** Yes No

Responsibilities: _____

Reason for leaving: _____

Company Name: _____ **Phone:** _____

Address: _____

Date Started: _____ **Starting Position:** _____

Date Ended: _____ **Ending Position:** _____

Name of Supervisor: _____ **May we contact?** Yes No

Responsibilities: _____

Reason for leaving: _____

Company Name: _____ **Phone:** _____

Address: _____

Date Started: _____ **Starting Position:** _____

Date Ended: _____ **Ending Position:** _____

Name of Supervisor: _____ **May we contact?** Yes No

Responsibilities: _____

Reason for leaving: _____

EMERGENCY CONTACT

In case of emergency, please notify:

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

Please read before signing:

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application.

I authorize my previous employers, schools, or persons listed as references to give any information regarding employment or educational record I agree that this company and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with this company, I will comply with all rules and regulations as set by the company in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to the company that verifies my right to work in the United States on the first day of employment. I have received from the company a list of approved documents that are required.

I understand that employment at this company is "at will", which means that either I 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 hereby acknowledge that I have read and understand the above statements.

Signature: _____ Date: _____