



APPLICATION FOR EMPLOYMENT

We consider all applications regardless of race, color, religion, sex, national origin, age, marital or veteran status or any other legally protected status.

Date of Application _____

PERSONAL INFORMATION

Full Name _____
Last First Middle

Current Address _____
Street Number City State Zip

Social Security Number _____ Phone Number _____

Are you 18 years old or older? Yes No Have you ever been convicted of a crime? Yes No
 If yes, please explain _____

EMPLOYMENT DESIRED

Job applying for _____ Date Available _____

Expected Pay _____ Shift Day Status Full-time Part-time Temporary

If part-time/temporary what hours? _____

Other positions you would be interested in _____

May we contact your present employer? Yes No _____

How did you learn of the opening?
 Newspaper _____ Employee _____ Other _____

EDUCATION

School	Name & Location	Course of Study	Circle Last Completed	List Diploma or Degree
Elementary			5 6 7 8	
High School			9 10 11 12	
College			1 2 3 4	
Other(specify)				

Scholastic Honors Received _____

List any other experiences, skills, qualifications or training _____

MILITARY EXPERIENCE

Are you a military Veteran? Yes No Dates of Active Duty ____/____/____ to ____/____/____

EMPLOYMENT EXPERIENCE

Please list current or most recent employment first

Employer	Dates Employed		Job Title
Address	From	To	Duties and Responsibilities _____ _____
Phone Number	Wage Information		
Supervisor	Starting	Ending	
Reason for Leaving			

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I verify that all information contained in this application is correct and true. I authorize an investigation of all statements contained in this application and release from all liability or responsibility all persons, companies or corporations supplying such information. I understand that if I am employed, any misrepresentation of the facts as stated or implied on this application form is sufficient cause for dismissal, whenever it is discovered.

I understand that my employment would be at will, and that either party is free to terminate the employment relationship without cause at any time.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment. I will also be required to successfully complete a health assessment and drug test before employment.

Applicant's Signature _____ Date _____