

APPLICATION FOR EMPLOYMENT

All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital or veteran status, medical condition or handicap, or any other status protected by law. We are an Equal Opportunity Employer.

PERSONAL

(Please Print)

Date _____

Name _____
Last First Middle Soc. Sec. # _____

Address _____
No. Street City State Zip

Telephone No. _____ Referred by: ☐ Our Advt. ☐ Emp. Agency ☐ Friend or Relative ☐ No One

Are you over 18 years of age? ☐ Yes ☐ No If NO, a work permit will be required.

Are you legally eligible for employment in the United States? ☐ Yes ☐ No. (If hired, verification will be required by law).

Position(s) applied for _____ ☐ Full Time ☐ Part Time

If part time, check days/hours available: ☐ Mon. _____ to _____; ☐ Tues. _____ to _____; ☐ Wed. _____ to _____;

☐ Thurs. _____ to _____; ☐ Fri. _____ to _____; ☐ Sat. _____ to _____; ☐ Sun. _____ to _____.

Date you are available to start work: ____/____/____ Salary or Wages desired: \$ _____ ☐ Hr. ☐ Wk.

Have you worked for us before? _____. If YES, when? _____ Position _____

Indicate special qualifications or skills _____

EDUCATION	NAME & LOCATION OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DID YOU GRADUATE?
ELEMENTARY				
HIGH SCHOOL				
COLLEGE		MAJOR: DEGREE:		
OTHER:				

Are you employed at the present time? ☐ Yes ☐ No. If hired, will you work overtime if required? ☐ Yes ☐ No

Have you ever been bonded in prior employment? _____. If YES, list name(s) of employer(s): _____

Have you ever been convicted of a crime (excluding misdemeanors and traffic offenses)? _____. If YES, list convictions:
(A conviction does not necessarily disqualify an applicant for the position being applied for).



CONTINUED ON REVERSE SIDE

PRIOR EMPLOYMENT

(Start with most recent employer)

Employer:	Phone:	From:	To:
Address: City, State, Zip		Position:	
Duties:		Supervisor's Name:	
		Starting Salary/Wages:	
Reason for leaving:		Final Salary/Wages:	
Employer:	Phone:	From:	To:
Address: City, State, Zip		Position:	
Duties:		Supervisor's Name:	
		Starting Salary/Wages:	
Reason for leaving:		Final Salary/Wages:	
Employer:	Phone:	From:	To:
Address: City, State, Zip		Position:	
Duties:		Supervisor's Name:	
		Starting Salary/Wages:	
Reason for leaving:		Final Salary/Wages:	

MILITARY SERVICE

BRANCH OF SERVICE	FROM	TO	RANK & DUTIES	DATE DISCHARGED

PERSONAL REFERENCES

NAME	ADDRESS	YEARS KNOWN	TELEPHONE

The above information is true and complete to the best of my knowledge. Should I be employed by the Company, any misrepresentation or false statement contained herein may be considered cause for possible dismissal. The Company has my permission to obtain all necessary information from the references I have listed, or any other sources, concerning my prior employment, personal history or credit standing and I release all parties from any possible damages resulting from disclosing such information with or without prior written notice to me. I reserve the right to know the names and addresses of any investigative agencies used in order that I may learn the information contained in any reports furnished to the Company.

I understand this application does not constitute an employment contract of any kind. Should I be employed by the Company, I may resign such employment at any time at my discretion with or without prior notice and the Company may terminate my employment at any time at their discretion, with or without cause and with or without prior notice.

Date: _____ Signature of Applicant: _____

DO NOT WRITE BELOW THIS LINE

SUMMARY OF INTERVIEW:	
Accepted for employment: <input type="checkbox"/> Yes <input type="checkbox"/> No Position: _____	
Starting Rate \$ _____ per <input type="checkbox"/> Hour <input type="checkbox"/> Week Scheduled to start work: ____/____/____	
Interviewed by: _____ Date: ____/____/____	
Approved by: _____ Date: ____/____/____	