

# APPLICATION FOR EMPLOYMENT

It is our policy to provide equal opportunities to all employees and applicants for employment, without regard to race, color, national origin, religion, sex, genetics, veteran status, age, disability or any other classification protected by the federal, state or local laws.

### PERSONAL INFORMATION

Name			Date		
Last	First	Middle			
Address					s
Street		City	State		Zip
Phone Number		E-mail			
Position(s) Applying For					
Full Time	Part Time	Date avai	lable		
Wage or Salary Require	ments \$				
Are you legally eligible for	or employment in the Uni	ited States?	YES		NO
Are you over 18 years o	ld?		YES		NO
How many hours per we	ek are you available?				
Have you ever been em	ployed with this company	/?	YES		NO
Can you perform the ess	sential functions of the po	osition for which yo	u are applying?	YES	NO
Have you been convicted of a felony in the past seven years? YES			NO		
If yes, explain and give t	the jurisdiction (state, city	or county, and ye	ar)		
Note: A yes response do	es not automatically disqu	ualify an applicant f	for employment.		
Are you currently on pro	bation or parole?		YES		NO
If yes, explain and give t	the jurisdiction (state, city	v or county, and ye	ar)		

Note: A yes response does not automatically disqualify an applicant for employment.

#### **EDUCATION**

	Name and Address of School	Years Attended	Did you Graduate	Subjects studied and degree(s) received
Graduate School		17		
College				
High School				
Business/Vocational School				

## <u>SKILLS</u>

Office

Computer software

Are there other experiences, skills, or qualifications that you feel would especially fit you for the position(s) for which you are applying?

#### EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

May we contact your present employer?	YESNO
Company Name	Telephone
Address	Employed - State month and year From To
Name of Supervisor	Last Salary - Hourly, Monthly or Yearly
Job Title and work description	Reason for leaving

Company Name	Telephone
Address	Employed - State month and year
	From To
Name of Supervisor	Last Salary - Hourly, Monthly or Yearly
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If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

#### REFERENCES

List three references who are not relatives or current employer.

Name	Title	Address	Phone
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## **Applicant's Certification and Acknowledgment**

I hereby certify that the facts set forth in the above employment application are true and complete. I understand that misrepresentation or omission of facts called for is cause for cancellation of this application or cause for dismissal if I become employed. I authorize this company to verify the accuracy of the facts contained herein and to obtain reference information on my work performance. I hereby release this company from any/all liability of whatever kind and nature that, at any time, could result from obtaining and having an employment decision based on such information. I further state that, should an employment offer be extended to me and accepted, I will fully adhere to the policies, rules and regulations of employment of this company. Further, I understand and agree that my employment is for no definite period and may be terminated at any time by me or the company for any reason without previous notice. I also understand that an offer of employment is conditional upon several criteria being met, including my satisfactory passing a physical examination and any/or associated laboratory test, which **may** be prescribed by the company.