



## Application for Employment

This employer will not refuse employment to a person because of race, creed, religion, color or national origin or because of age, physical or mental disability, marital status or sex when the reasonable demands of the position do not requires and age, physical or mental disability, marital status or sex distinction.

Personal Information				
Name				
Last	First	Initial	Date:	
Home Telephone:	Cell Phone:	E-mail Address:		
Physical Address and Mailing Address:			Can you drive? Yes No If no, Why?	
Are you Less than 18 yr of age? Yes No	Can you, after employment, submit verification of your Legal right to work in the U.S.? Yes No		Valid Drivers License Number:	
Names of friends/relatives employed at this Company:	Are you Employeed Now? Yes No		May we Contact your Present Employer? Yes No	
Are you on Lay-off and Subject to recall? Yes No	How did you learn about us?			
Have you Ever Been Convicted of a crime? Yes No	If yes, list dates, offenses and disposition. Note: Listed convictions are not an automatic disqualification from employment:			
Have you ever been: (If answering yes to any questions below, please attach additional pages with explanations)				
Placed on probation or terminated for poor job performance? Yes No				
Have you ever been disciplined or fired for insubordination? Yes No / Violation a safety Rule: Yes No				
Employment Interests				
Position Desired:	Second Choice:	What date are you available:	Wage Expected:	
What is your work schedule preference: M T W TH F S SUN Full Time/Part Time/Seasonal		List hours available:		
Education/Military Service				
School or Institution	Name and Address of School	Major	Units Completed / Grade Average	Degrees and/or Diplomas
High School				
College				
College				
Other				
Please indicate any foreign Languages that you:				
Speak	Read	Write		

## References

Use people we may contact who are qualified to evaluate your capabilities to perform the job for which you are applying (do not include relatives or former employers)

Name	Address	City	State	Zip	Phone #	Year Known

## Employment History

Give employment records as completely as possible, listing current or most recent employer first. Show unemployed or self-employed periods, indicate dates and comment on each period. Include part time or summer work only if you are a recent graduate or student. You may use extra sheets for additional information. Resumes may be submitted as well.

Company Name (Current or Last)	Address	Phone #	Dates Employed (month/year) From:                      To:
Job Title	Supervisor Name and Title		Pay Rate Start:                      End:
Description of Duties:			Reason for Leaving
Additional Comments:			If still employed, may we contact this employer?    Yes                      No
Company Name	Address	Phone #	Dates Employed (month/year) From:                      To:
Job Title	Supervisor Name and Title		Pay Rate Start:                      End:
Description of Duties:			Reason for Leaving
Company Name	Address	Phone #	Dates Employed (month/year) From:                      To:
Job Title	Supervisor Name and Title		Pay Rate Start:                      End:
Description of Duties:			Reason for Leaving
Company Name	Address	Phone #	Dates Employed (month/year) From:                      To:
Job Title	Supervisor Name and Title		Pay Rate Start:                      End:
Description of Duties:			Reason for Leaving

## This Employer is an equal employment opportunity employer

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID.**

I hereby certify that all answers, statements, or information made by me on this application or on my resume or other supplementary materials are true and correct to the best of my knowledge and without omissions. I further certify that I, the undersigned applicant, have personally completed this application. I acknowledge that any false statement or misrepresentation on this application, accompanying resume or supplementary materials will be cause for refusal to hire or for immediate dismissal from employment at any time during the period of my employment.

If offered a position, I understand that I will be required to submit proof of my eligibility to work in the United States.

I have read and understand the foregoing statements and accept the same as conditions of employment.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_