



Application for Employment

Please Print. Application must be complete and legible to be processed.
Note NA (not applicable) for questions you are not answering.

Position(s) applied for _____ Date of application ____/____/____

Name _____
LAST FIRST MIDDLE

Address _____
STREET CITY STATE ZIP

Phone # _____ Cell# _____ Social Security # _____

Are you legally eligible for employment in this country? Yes No

If you are under 18, and if it is required, can you furnish a work permit? N/A Yes No

Date available for work _____ Type of employment desired Full-time Part-Time Seasonal
 Other _____

Are you able to meet the attendance requirements of the position? Yes No

Have you applied here before? Yes No When? _____ Position applied for? _____

Can you perform the essential functions of this job with or without reasonable accommodations? _____

Drivers License # _____ Expiration Date _____ State _____

Have you had any moving violations within the last (7) years? Yes No (If yes, attach page with description)

Have you been convicted of a crime in the last (7) years? Yes No (If yes, attach page with description)

Violations or Convictions will NOT necessarily be a bar to employment, and all factors will be considered in relation to the position for which you apply.

List counties and states of residence for the past (7) years _____

EMPLOYMENT EXPERIENCE; Start with your present job or last job. Include military assignments.
Correct telephone numbers of past employers are critical. If necessary, ask for a phone book or call for information.

Employer 1 _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Supervisors' Name _____ Your Job Title _____ Salary or Hourly Rate _____

Duties _____ Dates of Employment: From _____ To _____

Reason for Leaving _____

Employer 2 _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Supervisor's Name _____ Your Job Title _____ Salary or Hourly Rate _____

Duties _____ Dates of Employment: From _____ To _____

Reason for Leaving _____

Employer 3 _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Supervisor's Name _____ Your Job Title _____ Salary or Hourly Rate _____

Duties _____ Dates of Employment: From _____ To _____

Reason for Leaving _____

REFERENCES: List only individuals familiar with your work ability. Do not include relatives or supervisors listed above.

Name	Address & Phone	Years Known & Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

EDUCATIONAL BACKGROUND:

Name	City/State	Graduated	Degree Type
High School _____	_____	[]Yes []No	_____
College _____	_____	[]Yes []No	_____
Other _____	_____	[]Yes []No	_____

SKILLS AND QUALIFICATIONS: Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment. I understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date ____/____/____