Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application

How Did You Learn About Us?

☐ Advertisement ☐ Friend ☐ Walk-In

☐ Employment Agency ☐ Relative ☐ Other _____

Last Name	First Name	Middle Name

Address *Number*	*Street*	*City*	*State*	*Zip Code*

Telephone Number(s)	Social Security Number

If you are under 18 years of age, can you provide required proof of your eligibility to work? ☐ Yes ☐ No

Have you ever filed an application with us before? ☐ Yes ☐ No

If Yes, give date _____

Have you ever been employed with us before? ☐ Yes ☐ No

If Yes, give date _____

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ☐ Yes ☐ No

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work: ☐ Full Time ☐ Part Time ☐ Shift Work ☐ Temporary

Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No

Can you travel if a job requires it? ☐ Yes ☐ No

Have you been convicted of a felony within the last 7 years? ☐ Yes ☐ No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read and / or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

Employment Experience

Start with your present or last job. Include any job-related military service and volunteer activities. You may exclude organizations which indicate race, co gender, national origin, disabilities or other protected status.

1.	Employer	Dates Employed		Work Perf
	Address	From	To	
	Telephone Number(s)	Hourly Rate/Salary		
	Job Title / Supervisor	Starting	Final	
	Reason for Leaving			
2.	Employer	Dates Employed		Work Perf
	Address	From	To	
	Telephone Number(s)	Hourly Rate/Salary		
	Job Title / Supervisor	Starting	Final	
	Reason for Leaving			
3.	Employer	Dates Employed		Work Perfo
	Address	From	To	
	Telephone Number(s)	Hourly Rate/Salary		
	Job Title / Supervisor	Starting	Final	
	Reason for Leaving			
4.	Employer	Dates Employed		Work Perfo
	Address	From	To	
	Telephone Number(s)	Hourly Rate/Salary		
	Job Title / Supervisor	Starting	Final	
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of pap

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ance or other protected status:

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employmen may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to ex 45 days. Any applicant wishing to be considered for employment beyond this time pe should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, employment relationship with this organization is of an *"at will"* nature, which means the Employee may resign at any time and the Employer may discharge Employee at any with or without cause. It is further understood that this *"at will"* employment relation may not be changed by any written document or by conduct unless such change is specifi acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given ir application or interview(s) may result in discharge. I understand, also, that I am require abide by all rules and regulations of the employer.

Signature of Applicant _____ Date _____

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview ☐ Yes ☐ No

Remarks _____

_____ INTERVIEWER _____ DATE

Employed ☐ Yes ☐ No Date of Employment _____

Job Title _____ Hourly Rate/ Salary _____ Department _____

By _____ NAME AND TITLE _____ DATE

NOTES _____

Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

_____

_____

_____

Specialized Skills

Check Skills/Equipment Operated

		Production/Mobile Machinery (list):	Other (list):
___CRT	___Fax	_____	_____
___PC	___Lotus 1-2-3	_____	_____
___Calculator	___PBX System	_____	_____
___Typewriter	___Wordperfect	_____	_____
		_____	_____

State any additional information you feel may be helpful to us in considering your application.

_____

_____

_____

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached. ____YES ____NO

References

1. _____ ( ) _____
(Name) Phone #

_____
(Address)

2. _____ ( ) _____
(Name) Phone #

_____
(Address)

3. _____ ( ) _____
(Name) Phone #

_____
(Address)

FOR PERSONNEL DEPARTMENT USE ONLY

Position(s) Applied For Is Open: ☐ Yes ☐ No

Position(s) Considered For: _____

_____

Date _____

NOTES:

NAME: _____ POSITION: _____ DATE: ___/___/___

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