

APPLICATION FOR EMPLOYMENT

PLEASE PRINT

Position (s) Applied for:		Date of Application:			
Name:	FIRST		MIDDLE		
Address:					
STREET	CITY		STATE	ZIP	
Telephone:		SSN:			
If you are under 18, can you fu	urnish a work permit?		Yes	No	
Have you ever been employed	I here before?		Yes	No	
Are you legally eligible for em (Proof of U.S. citizenship or immigr		employment.)	Yes	No	
Date available for work:					
Type of employment desired:	Full-time	Part-time	Te	emporary	
Are you able to meet the atten	dance requirements of the po	sition?:	Yes	No	
Have you been convicted of a (Such conviction may be relevant if			Yes	No	
If yes, please explain:					
Driver's License number (if re	equired by job):		State:		
SKILLS AND QUALIFICA' Summarize special skills and qualifi with our company.	cations acquired from employment	or other experiences tha	t may qualify yo	ou for work	

EMPLOYMENT HISTORY

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience.

From	То	Employer			Telephone	
Job Title		Address				
Immediate Superv	visor and Title	Summarize the	nature of work perfor	med and job responsibilitie	S	
Reason for leaving		Hourly Rate/Sa	lary			
		Start \$	per	Final \$	per	
	ı				1	
From	То	Employer			Telephone	
Job Title		Address				
Immediate Superv	visor and Title	Summarize the nature of work performed and job responsibilities				
Reason for leaving Hourly Rate/Salary						
_		Start \$	per	Final \$	per	
					•	
From	То	Employer			Telephone	
Job Title		Address				
Immediate Superv	mmediate Supervisor and Title Summarize the nature of work performed and job responsibilities					
Reason for leaving	g	Hourly Rate/Sa	lary			
		Start \$	per	Final \$	per	
From	То	Employer			Telephone	
Job Title		Address				
Immediate Superv	mmediate Supervisor and Title Summarize the nature of work performed and job responsibilities					
Reason for leaving	Reason for leaving Hourly Rate/Salary					
		Start \$	ner	Final \$	ner	

EDUCATIONAL BACKGROUND

Name and Location	Years Completed	Did You Graduate?		Course of Study
High School				
College		Major	Degree	
Other				

REFERENCES

Name	Telephone	Years Known
	Area Code	
	Area Code	
	Area Code	

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the Employer's service if I have been employed.

I give the Employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Employer is an Equal Opportunity Employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

The Employer believes that all employees are to be treated with respect and dignity. Sexual harassment or harassment for any reason, such as that based on race, color, religion, national origin, age, marital status or physical handicap, by a supervisor or another employee will not be tolerated under any circumstances, and can lead to disciplinary action, up to and including discharge.

The 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.

I understand that, just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with our without cause, and without prior notice. I understand that no representative of the Employer has the authority to make any assurance to the contrary.

Signature of Applicant:	Date:	