

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, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
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Last Name	First Name	Middle Name
Address	Number	Street
	City	State
		Zip Code
Telephone Number(s)	Social Security Number	

Best time to contact you at home is: _____:_____ AM or PM

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 _____

Do any of your friends or relatives, other than a spouse, work here? Yes No
If Yes, state name, relationship and department _____

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)

Date available for work ___/___/___ What is your desired salary range? _____

Are you available to work Full Time
 Part Time
 Temporary (Please indicate dates available ___/___/___ - ___/___/___)

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

Can you travel if a job requires it? Yes No

EDUCATION

SCHOOL	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DIPLOMA/ DEGREE
HIGH SCHOOL				
UNDERGRADUATE COLLEGE				
GRADUATE/ PROFESSIONAL				
OTHER (Specify)				

WORK EXPERIENCE

<u>Employer</u>	<u>Dates Employed</u>	<u>Work Performed</u>
<u>Address</u>	<u>From - To</u>	
<u>Telephone Number(s)</u>		
<u>Starting/Present Job Title</u>		
<u>Supervisor</u>		
<u>Reason For Leaving</u>		
		<u>May We Contact?</u> Yes ____/No ____

<u>Employer</u>	<u>Dates Employed</u>	<u>Work Performed</u>
<u>Address</u>	<u>From - To</u>	
<u>Telephone Number(s)</u>		
<u>Starting/Present Job Title</u>		
<u>Supervisor</u>		
<u>Reason For Leaving</u>		
		<u>May We Contact?</u> Yes ____/No ____

<u>Employer</u>	<u>Dates Employed</u>	<u>Work Performed</u>
<u>Address</u>	<u>From - To</u>	
<u>Telephone Number(s)</u>		
<u>Starting/Present Job Title</u>		
<u>Supervisor</u>		
<u>Reason For Leaving</u>		
		<u>May We Contact?</u> Yes ____/No ____

<u>Employer</u>	<u>Dates Employed</u>	<u>Work Performed</u>
<u>Address</u>	<u>From - To</u>	
<u>Telephone Number(s)</u>		
<u>Starting/Present Job Title</u>		
<u>Supervisor</u>		
<u>Reason For Leaving</u>		
		<u>May We Contact?</u> Yes_____/No_____

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

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

List professional, trade, business or civic activities and offices held. *(You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status.)*

ADDITIONAL INFORMATION

Other Qualifications *summarize special job- related skills and qualifications acquired from employment or other experience*

PERSONAL/PROFESSIONAL REFERENCES: *Do not include family members or past supervisor.*

Name	Phone Number	Best Time to Call
1)		
2)		

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

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

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period 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, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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

Signature of Applicant

Date