

Application For Employment

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job-related medical condition or handicap.

(PLEASE PRINT)

Date of Application _____

Position(s) Applied For _____

Referral Source: Advertisement Employment Agency Walk-In

Other _____ Friend _____ Relative _____
(Name) (Name)

Name _____
(First) (Middle) (Last)

Address _____
(Street) (City, State) (Zip Code)

Residence Telephone () _____ Social Security # _____

Business Telephone () _____

If employed and you are under 18, can you furnish a work permit? Yes No

Have you filed an application here before? Yes No If yes, give date _____

Have you ever been employed here before? Yes No If yes, give date _____

Are you employed now? 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 may be required upon employment.)

On what date would you be available for work? _____

Are you available to work Full Time Part-Time Temporary

Are you available to work Daytime Evenings Weekends

Are you on a lay-off 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 applicant from employment.)

If yes, please explain _____

AN EQUAL OPPORTUNITY EMPLOYER

Are you a veteran of the U.S. Military Service? Yes No If yes, Branch _____

Indicate languages you speak, read, and/or write.

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and offices held.
(You may exclude those which indicate race, color, religion, sex or national origin): _____

Give name, address and telephone number of three references who are not related to you and are not previous employers:

Special Employment Notice to Disabled Veterans, Vietnam Era Veterans, and Individuals With Physical or Mental Handicaps.

Government contractors are subject to 38 USC 2012 of the Vietnam Era Veterans Readjustment Act of 1974 which requires that they take affirmative action to employ and advance in employment qualified disabled veterans and veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended, which requires government contractors to take affirmative action to employ and advance in employment qualified handicapped individuals.

If you are a disabled veteran, or have a physical or mental handicap, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodation to enable you to perform the job to the best of your ability in a proper and safe manner. This information will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect your consideration for employment.

If you wish to be identified, please sign below.

- Handicapped Individual Disabled Veteran Vietnam Era Veteran

Signed _____

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities.

1	Employer	Telephone	Dates Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
			Starting	Final	
Supervisor					
Reason for Leaving					
2	Employer	Telephone	Dates Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
			Starting	Final	
Supervisor					
Reason for Leaving					
3	Employer	Telephone	Dates Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
			Starting	Final	
Supervisor					
Reason for Leaving					
4	Employer	Telephone	Dates Employed		Work Performed
			From	To	
	Address				
	Job Title		Hourly Rate/Salary		
			Starting	Final	
Supervisor					
Reason for Leaving					

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

We may contact the employers listed above unless you indicate those you do not want us to contact.

Do Not Contact
Employer No(s). _____ Reason _____

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience

Education

	Elementary	High	College/University	Graduate/Professional
School Name				
Years Completed:(Circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree Describe Course of Study:				
Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities				

Honors Received:

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

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 employment as may be necessary in arriving at an employment decision.

I understand that this application is not and is not intended to be a contract of employment, and that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

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

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