



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
How did you hear about us?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Relative
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Friend
<input type="checkbox"/> Inquiry	
<input type="checkbox"/> Other _____	

Last Name	First Name	Middle Name
Street Address	City	State
Telephone Number(s)	Zip	Social Security Number

Best time to contact you at home is:	_____ : _____ am/pm
Have you ever filed and application with us before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, give date: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed with us before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, give date: _____	
Do any of your friends or relatives, other than spouse, work here?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact your present employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire</i>	
Date available for work ____/____/____	What is your desired salary range? _____
Are you available to work:	
<input type="checkbox"/> Full-Time (please indicate 1 2 3 shift)	<input type="checkbox"/> Part-Time (please indicate Mornings Afternoon Evenings)
<input type="checkbox"/> Temporary (please indicate dates available ____/____/____ - ____/____/____)	
Are you currently on "lay-off" status and subject to recall?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you been convicted of a felony within the last five years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<small>A criminal record does not constitute an automatic bar to employment and will be considered only as it relates to the job in question.</small>	
Can you travel if job requires it?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Education

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

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

Employment History (5 years)

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

1	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)				
	Job Title	Supervisor			
	Reason for Leaving				
2	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)				
	Job Title	Supervisor			
	Reason for Leaving				
3	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)				
	Job Title	Supervisor			
	Reason for Leaving				

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

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:

Specialized Skills (Check Skills/Equipment Operated)

___ Terminal	___ Spreadsheet	Production/Mobile Machinery (list)	Other(list)
___ PC/MAC	___ Word Processing	_____	_____
___ Typewriter	___ Shorthand	_____	_____
WPM _____	WPM _____	_____	_____

References

1. Name	()
Address	Phone #
2. Name	()
Address	Phone #
3. Name	()
Address	Phone #

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

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview ☐ Yes ☐ No

Employed ☐ Yes ☐ No Date of Employment _____ -

Job Title _____ Hourly Rate/Salary _____ Department _____

By _____

Name and Title

Date