

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? <input type="checkbox"/> Advertisement Where _____ <input type="checkbox"/> Employment Agency Who _____	<input type="checkbox"/> Friend Who _____ <input type="checkbox"/> Relative Who _____ <input type="checkbox"/> Walk-In	<input type="checkbox"/> Employee Who _____ Other _____

Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Home Number			Mobile Number		

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 _____ If Yes, may we contact your present employer? Yes _____ No _____

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 _____

Education

	Name and Location (City, State) of School	Course of Study	Years Completed/Did You Graduate?	Diploma/Degree
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.

Employment Experience

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

If you need additional space, please continue on a 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:

Additional Information

Other Qualifications

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

Specialized Computer Skills (please check one for each item)

	No Experience	Beginner	Intermediate	Advanced
MS Word				
MS Excel				
MS Outlook				
MS PowerPoint				

Typing (WPM) _____

Other (List)

Licenses/Certifications

Please list any licenses or certifications you currently have (including the state the license/certification is in, if applicable).

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 occupation for which you have applied? _____ Yes _____ No

References

Please list 3 PROFESSIONAL REFERENCES (someone who has supervised, managed or directed you, in current/past employment)

1.

Supervisor's Name

Supervisor's Title

Company

()
Contact #

2.

Supervisor's Name

Supervisor's Title

Company

()
Contact #

3.

Supervisor's Name

Supervisor's Title

Company

()
Contact #

Applicant's Statement

I certify that answers given herein are true and completed 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 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.

Applicant Signature

Date