

Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, physical or mental disability, or veteran status.

Applicant Information

Date _____

Last Name _____ First Name _____ Middle Initial _____

Street address _____

City _____ State _____ Zip Code _____

Telephone number _____

Email Address _____

Position Applied for _____

Desired Salary \$ _____

How did you learn of this job opening? _____

Please list applicable skills _____

Are you presently employed? Yes _____ No _____

May we contact your present employer? Yes _____ No _____

Are you available for full-time employment? Yes _____ No _____

Date available _____

Are you a citizen or authorized to work in the U. S.? On an unrestricted basis? (You may be required to provide documentation.) Yes _____ No _____



Are you looking for full-time employment? Yes _____ No _____

If not, what hours are you available?

Do you have reliable transportation? Yes _____ No _____

Do you have any health conditions or restrictions that would preclude you from performing the functions of this position? Yes _____ No _____

Education

High School _____

Address _____

From _____ To _____ Did you Graduate? Yes _____ No _____ Diploma: _____

College _____

Address _____

From _____ To _____ Did you Graduate? Yes _____ No _____ Degree: _____

Other _____

Address _____

From _____ To _____ Did you Graduate? Yes _____ No _____ Degree: _____

In addition to your work history, are there any other skills, qualifications, or experience that we should consider?



Please list three professional or personal references who have known you for more than a year.

Full Name _____ Relationship _____

Company _____ Phone _____

Address _____

Full Name _____ Relationship _____

Company _____ Phone _____

Address _____

Full Name _____ Relationship _____

Company _____ Phone _____

Address _____

Previous Employment (Attachment of a Resume is acceptable)

Company _____

Supervisor _____ Phone _____

Address _____

Job Title _____ Starting Salary _____ Ending Salary _____

Responsibilities _____

From _____ To _____ Reason for leaving _____

May we contact your previous supervisor for a reference? Yes _____ No _____



Company _____

Supervisor _____ Phone _____

Address _____

Job Title _____ Starting Salary _____ Ending Salary _____

Responsibilities _____

From _____ To _____ Reason for leaving _____

May we contact your previous supervisor for a reference? Yes _____ No _____

Company _____

Supervisor _____ Phone _____

Address _____

Job Title _____ Starting Salary _____ Ending Salary _____

Responsibilities _____

From _____ To _____ Reason for leaving _____

May we contact your previous supervisor for a reference? Yes _____ No _____

Do you possess any related certifications or specialized training? _____



Disclaimer and Signature

Please read before signing:

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application.

I authorize my previous employers, schools, or persons listed as references to give any information regarding my employment or educational record. I agree that this employer and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with this employer, I will comply with all rules and regulations as set by this employer, I will comply with all rules and regulations as set by this employer in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to this employer that verifies my right to work in the United States on the first day of employment. I have received from this employer a list of approved documents that are required. I understand that employment at this employer is “at will” which means that either I or this employer can terminate the employment relationship at any time with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I hereby acknowledge that I have read and understand the above statements.

Signature _____ Date _____

Note:

Please be advised that all applicants will be subject to a pre-employment drug screen and background investigation through a third party provider. Upon written request a copy of these findings will be provided to you.

