



# APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

<b>Please print and complete all pages.</b>		Date _____
Name _____ <small>Last First Middle</small>		
Street address _____		
City _____ State _____ Zip _____		
Telephone ( ) _____		Cell ( ) _____
If under 18 please list age _____ Can you furnish a work permit? Yes ___ No ___		Will you travel if the job requires it? _____
Position applied for _____		Days and hours you are available to work:  No Pref _____ Thur _____ Mon _____ Fri _____ Tue _____ Sat _____ Wed _____ Sun _____  How many hours can you work weekly? _____
Salary desired (Be specific) _____		
How did you hear about the position? _____		
This employee referred me: _____		
Employment desired <input type="checkbox"/> Full-time only <input type="checkbox"/> Part-time only <input type="checkbox"/> Full or Part-time <input type="checkbox"/> Seasonal or Temporary		
When are you available to start work? _____		
Are you legally eligible for work in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been employed here before? <input type="checkbox"/> Yes <input type="checkbox"/> No    Dates: from _____ to _____		
Did you work here before with a different name? If so, what name? _____		

Type of School	Name of School	Location City and State	Number of Years Completed	Major / Degree
High School				
College				
Business or Trade School				
Professional School				

Have you ever pled "guilty" or "no contest" or been convicted of a crime?     No     Yes

If yes, explain number of conviction(s), date(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Will you travel if the job requires it? \_\_\_\_\_

Do you have a driver's license?  Yes  No

Driver's license number \_\_\_\_\_ State of issue \_\_\_\_\_

Operator  Commercial (CDL)  Chauffeur

Email <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Office Skills</b>	Spreadsheet <input type="checkbox"/> Yes	Word Processing <input type="checkbox"/> Yes
Internet <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> No	<input type="checkbox"/> No

Personal Computer  Yes  No PC  Mac

Do you have any special training, certifications etc. that may pertain to the position for which you are applying? \_\_\_\_\_  
\_\_\_\_\_

Is there any other job-related information you want us to know about you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list at least three **professional** references

Name _____ Position _____ Company _____ Address _____ Telephone (____) _____	Name _____ Position _____ Company _____ Address _____ Telephone (____) _____
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Name _____ Position _____ Company _____ Address _____ Telephone (____) _____	Name _____ Position _____ Company _____ Address _____ Telephone (____) _____
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Have you ever been fired or asked to resign from a job?  No  Yes

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Work Experience** Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From To	Start Final

May we contact for reference? Yes No Later Your last job title

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
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May we contact for reference? Yes No Later	Your last job title		
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List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From To	Start Final
May we contact for reference? Yes No Later	Your last job title		
Reason for leaving (be specific)			
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Name of employer Address	Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		From To	Start Final
May we contact for reference? Yes No Later	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Explain any gaps in your employment, other than those due to personal illness, injury or disability:

Did you complete this application yourself?  Yes  No

If not, who did?

## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contract and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this company is an equal employment opportunity employer and makes employment decisions without regard to an applicant's race, color, sex, religion, sexual orientation, national origin, citizenship, age or disability.

I understand that this application remains current for only 30 days. At the end of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.

If I am hired, I understand that I am free to resign at any time, with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for elimination from consideration for employment or immediate discharge, without warning, from the company's service.

I certify that I have read the foregoing statement and fully understand and accept all terms thereof.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date