

# APPLICATION FOR EMPLOYMENT

## AN EQUAL OPPORTUNITY EMPLOYER

*We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, genetic information or any other status protected by law or regulation. It is our intention that all qualified applicants are given equal opportunity and that selection decisions are based on job-related factors.*

Answer each question full and accurately. No action can be taken on this application until you have answered all questions. Use bank paper if you do not have enough room on this application. **PLEASE NOTE**, none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Job Applied For \_\_\_\_\_ Today's Date \_\_\_\_\_

Are you seeking: Full-time  Part-time  Temporary  employment? When could you start work? \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_ Telephone \_\_\_\_\_

Full Address \_\_\_\_\_

Are you 18 years of age or older? (If hired, you may be required to submit proof of age.) Yes  No

If hired, can you furnish proof you are eligible to work in the U.S.? Yes  No

Have you ever applied here before? Yes  No  If yes, when? \_\_\_\_\_

Were you ever employed here? Yes  No  If yes, when? \_\_\_\_\_

Have you even been convicted of any law violation?  
(Include any plea of "guilty" or "no contest.") Yes  No

If Yes, provide details \_\_\_\_\_  
(A conviction will not necessarily disqualify an applicant for employment)

If employed, do you expect to be engaged in any additional business  
or employment outside of our job? Yes  No

If Yes, provide details \_\_\_\_\_

For Driving Jobs ONLY: Do you have a valid driver's license? Yes  No

Driver's License Number \_\_\_\_\_ Class of License \_\_\_\_\_ State Licensed In \_\_\_\_\_

Have you had your driver's license suspended or revoked in the last 3 years? Yes  No

If Yes, provide details \_\_\_\_\_

List professional, trade, business or civic activities and offices held (Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability, genetic information or other protected status.)  
\_\_\_\_\_  
\_\_\_\_\_

### List Name and Address of Schools (Include number of Years completed, Diploma & subject studied)

High School or GED: \_\_\_\_\_

College or University: \_\_\_\_\_

Vocational or Technical: \_\_\_\_\_

What skills or additional training do you have that relate to the job for which you are applying? \_\_\_\_\_

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give organization name and supply business references. **NOTE:** A job offer may be contingent upon acceptable references from current and former employers.

Employer		Job Title	
Address		Employment Dates (From)	(To)
City, State, Zip		Pay (Start)	(Final)
Supervisor(s)	Phone	Reason for Leaving	
Employer		Job Title	
Address		Employment Dates (From)	(To)
City, State, Zip		Pay (Start)	(Final)
Supervisor(s)	Phone	Reason for Leaving	
Employer		Job Title	
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Supervisor(s)	Phone	Reason for Leaving	
Employer		Job Title	
Address		Employment Dates (From)	(To)
City, State, Zip		Pay (Start)	(Final)
Supervisor(s)	Phone	Reason for Leaving	

Have you ever worked or attended school under any other names? Yes \_\_ No \_\_

If Yes, provide names: \_\_\_\_\_

Are you presently employed? Yes \_\_ No \_\_

If Yes, whom do you suggest we contact?: \_\_\_\_\_

Have you ever been fired from a job or asked to resign? Yes \_\_ No \_\_

If Yes, provide explain: \_\_\_\_\_

Provide three references, not relatives.

Name	Address	Phone

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**Please Read Each Statement Carefully Before Signing**

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I authorize the investigation of any or all statements contained in this application. I also authorize whether listed or not, any person school, current employer, past employer and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment if required. I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any and all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

**I UNDERSTAND THAT THIS APPLICATION, VERBEL STATEMENT BY MANAGEMENT OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESEIDENT OF THE ORGANZIATION HAS THE AUTHORITY TO ENTER IN AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE, IF EMPLOYED, I UNDERSTAND THAT I HAVEEN HIRED AT THE WILL OF THE EPLOYER AND MY EMPLOYMENT MAY BE TERMINTATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.**

I have read, understand and by my signature consent to these statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This application for employment will remain active for a limited period. Ask the organization's representative for details.