## **Application for Employment**

Instructions: It is the policy of the company to provide equal opportunity with regard to all terms and conditions of employment. The company complies with federal and state laws prohibiting discrimination on the basis of race, color, religion, creed, national origin, disability, veteran status, age, or any other protected characteristic.

Name Ho	me Phone ( )
Cellular/Other Phone ( )E-mail	
Address	€ Sea spek _ ° ,
City/State/ZIP	For Office Use Only
Position applied for	Applicant #
Shift preferred: 1 2 3 Any Not Applicable	Employee #
Expected salary range or hourly rate of pay	Hire Date
Type of work desired Full-time Part-time Seasonal Temporary	Position
Date available for work	Rate
How were you referred to this company?	
Have you ever been employed here before? Yes No If yes, give dates	
Is this application a request for reemployment following an extended military leave of absence from this company? Yes No If Yes, additional information may be requested.	Other
If you are under 18 years old, can you provide a work permit if required? Yes No	Notes:
Are you legally eligible for employment in the USA? Yes No If Yes, proof is required if hired.	
Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)? This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitte	a disability, d by law.
Yes No Need more information about the job's "essential functions" to respond	
Will you relocate if required? Yes No No	
Will you travel if required? Yes No	
Will you work overtime if required? Yes No No	Attachments  Resumé
If driving may be required in the job for which you are applying, please provide your driver's license	
DL#State	
Have you ever been bonded? Yes No No	Test Results



Date of Application \_\_\_

## **Employment Experience**

Place an 🔀 by the employer(s) you *do not* want us to contact. List your most recent employer first. Employer \_\_\_\_\_ Address Job Title \_\_\_\_\_\_ Supervisor \_\_\_\_\_ E-mail \_\_\_\_\_ Phone ( Dates Employed: from (mm/yy) \_\_\_\_\_ to (mm/yy) \_\_\_\_ Hourly rate/salary: starting \_\_\_\_ final \_\_\_\_ Work Performed \_\_\_\_\_ Reason for Leaving Employer \_\_\_\_\_ Address \_\_\_\_\_ Job Title \_\_\_\_\_\_ Supervisor \_\_\_\_\_ E-mail \_\_\_\_\_ Phone ( )\_\_\_\_\_ Dates Employed: from (mm/yy) \_\_\_\_\_ to (mm/yy) \_\_\_\_\_ Hourly rate/salary: starting \_\_\_\_ final \_\_\_\_ Work Performed Reason for Leaving \_\_\_\_\_ Employer \_\_\_\_\_ Job Title \_\_\_\_\_\_ Supervisor \_\_\_\_\_ E-mail \_\_\_\_\_Phone ( Dates Employed: from (mm/yy) \_\_\_\_\_ to (mm/yy) \_\_\_\_ Hourly rate/salary: starting \_\_\_\_ final \_\_\_\_ Work Performed \_\_\_\_\_ Reason for Leaving Employer \_\_\_\_\_ Job Title \_\_\_\_\_\_ Supervisor \_\_\_\_\_ E-mail \_\_\_\_\_ Phone ( Dates Employed: from (mm/yy) \_\_\_\_\_ to (mm/yy) \_\_\_\_ Hourly rate/salary: starting \_\_\_\_ final \_\_\_\_ Work Performed \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Have you ever been fired or asked to	resign from a job? Yes	No 🗌	
		·	
Educational Backgroui	nd		
High School: Name of school		Location	
Course of study	Did you graduate? Yes	No Degree or diploma	Years completed
College: Name of school			
	Did you graduate? Yes	No Degree or diploma	
Graduate School: Name of school		Location	
		No Degree or diploma	
<b>/ocational Training — Other:</b> Name of school			
Mullic of School			7.5
	Did vou graduate? Yes	No Degree or diploma	Years completed
Course of study	Did you graduate? Yes _	No Degree or diploma	Years completed
Course of study	Did you graduate? Yes _	No Degree or diploma	Years completed
Course of study		No Degree or diploma	Years completed
Course of study Continuing Education:  Skills and Qualification	18	No Degree or diploma  sist you in performing the position for	
Course of study Continuing Education:  Skills and Qualification	18		
Course of study Continuing Education: Skills and Qualification	18		
Course of study Continuing Education:  Skills and Qualification	ns and/or certificates that may as	sist you in performing the position for	
Course of study Continuing Education:  Skills and Qualification ist any special training, skills, license Computer Skills (Check appropriate Word Processing	es and/or certificates that may as boxes. Include software titles a Years:	sist you in performing the position for	r which you are applying:  Years:
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Course of study	aboxes. Include software titles and Years: Years: Years: Years: Years: Hion you want us to know about	and years of experience.)  Internet	years: Years: Years: Years: Years:

## **Applicant Statement**

Applicant's Signature

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false or misleading information, omissions, or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact 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, resumé 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 application remains active for only 30 days. At the conclusion 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.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment, either expressed or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the company. I understand that no company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

this Application for Employme that may violate local, state, c	nt has been prepared for general use throughout the United States. Neither HKdirec ir federal laws. Users should consult their legal counsel about any questions they m	t nor its counsel or advisers assumes ay have concerning this form or its us	any responsibility tor the inclusion i e.	n the Application for Employment of any questions
	APPLICANT: Do not write	in this space.	For office use on	y.)
Interview	/S			
Date	Interviewer(s)	and the public control to the contro		
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Test Res				
Tests Administe	red	Date	Score	Rating
				,
Poference	ee Checks			
Date Contacted	Reference Name	Conta	ted By	

Please respond yes or no to the questions below, then sign and date.
Have you had any charges, arrests, or convictions for a crime related to child abuse or other child abuse offenses?
Yes or no:
Have you ever been convicted of a felony charge?
Yes or no:
Signature:
Date: