



# EMPLOYMENT APPLICATION

### EQUAL OPPORTUNITY EMPLOYER

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

Position Applied For: \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Telephone # (\_\_\_\_) \_\_\_\_\_ Cell/Other (\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

If you are under 18, can you furnish a work permit? Yes No

How were you referred? \_\_\_\_\_ Please list any family/friends in our employment: \_\_\_\_\_

Do you have a non-compete/non-disclosure agreement with any of your previous employers? Yes No

Have you ever been employed here before? Yes No If yes, give dates and position \_\_\_\_\_

Are you legally eligible for employment in this country? Yes No

Date available for work \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary range? \$ \_\_\_\_\_

Type of employment desired Full-Time Part-Time Temporary Seasonal

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

If yes, please provide date (s) and details \_\_\_\_\_

*Answering "yes" to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.*

Driver's License number (if driving is an essential job function) \_\_\_\_\_ State \_\_\_\_\_

Permission for DMV record to be ran? Yes No Signature \_\_\_\_\_

**EMPLOYMENT HISTORY**

(Provide the following information of your past three (3) employers, assignments or volunteer activities, starting with the most recent).

Employer \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

From \_\_\_\_\_ (month/yr) To \_\_\_\_\_ (month/yr)

Starting Job Title \_\_\_\_\_ Starting Pay \_\_\_\_\_ Per \_\_\_\_\_

Final Job Title \_\_\_\_\_ Final Pay \_\_\_\_\_ Per \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_ Title \_\_\_\_\_

Summarize the nature of work performed and job responsibilities.

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_ May we contact for reference? Yes No Later



Employer \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

From \_\_\_\_\_ (month/yr) To \_\_\_\_\_ (month/yr)

Starting Job Title \_\_\_\_\_ Starting Pay \_\_\_\_\_ Per \_\_\_\_\_

Final Job Title \_\_\_\_\_ Final Pay \_\_\_\_\_ Per \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_ Title \_\_\_\_\_

Summarize the nature of work performed and job responsibilities.

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_ May we contact for reference? Yes No Later



Employer \_\_\_\_\_ Telephone # (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

From \_\_\_\_\_ (month/yr) To \_\_\_\_\_ (month/yr)

Starting Job Title \_\_\_\_\_ Starting Pay \_\_\_\_\_ Per \_\_\_\_\_

Final Job Title \_\_\_\_\_ Final Pay \_\_\_\_\_ Per \_\_\_\_\_

Immediate Supervisor \_\_\_\_\_ Title \_\_\_\_\_

Summarize the nature of work performed and job responsibilities.

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_ May we contact for reference? Yes No Later



**SKILLS AND QUALIFICATIONS:** Summarize any training, skills, license and/or certifications that may qualify you as being able to perform job-related functions in the position for which you are applying.

**EDUCATION BACKGROUND**

NAME AND LOCATION	NUMBER OF YEARS COMPLETED	DID YOU GRADUATE?		COURSE OF STUDY
		Major	Degree	
High School				
College		Major	Degree	
Technical College		Major	Degree	
Other		Major	Degree	

**REFERENCES**

NAME AND ADDRESS	TELEPHONE NUMBER	NUMBER OF YEARS KNOWN

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (I) cancel further consideration of this application, or (II) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employee 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, résumé 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 such information in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that the application remains current 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 to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and 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 unless they are in writing and signed by the employer's president.

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

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT AGREEMENT.**

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_