

EMPLOYMENT APPLICATION

It is the policy of this company to provide equal employment opportunities to all applicants and employees without regard to race, color, citizenship status, religion, sex, sexual orientation, marital status, age, national origin, status as an individual with a disability, or any other legally protected status as a disabled and/or Vietnam Era Veteran and to affirmatively seek to advance the principles of equal employment opportunity.

PLEASE PRINT

POSITION(S) APPLIED FOR _____ LOCATION _____

NAME _____ SOCIAL SECURITY NUMBER _____
LAST FIRST MIDDLE

ADDRESS _____
STREET CITY STATE ZIP

TELEPHONE () _____ ALTERNATE TELEPHONE () _____ Cell Pager

GENERAL INFORMATION	
Are you at least 18 years of age? If not, are you at least 16 years of age?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
If under age 18, can you supply working papers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you legally eligible for employment in this country? If offered employment, you will be required to provide documentation to verify eligibility.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed by this company or any of its divisions? If yes, Where? When? Supervisor's Name? Why did you leave? Please be specific.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a crime? (A conviction will not automatically disqualify you for employment. Factors such as job relations, seriousness and nature of violation and rehabilitation will be taken into account.) If yes, please explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been discharged from any employment or asked to resign? If yes, please explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Best time to contact you?	_____ AM / PM
Do you have any relatives employed by this company or any of its divisions? If yes, Name of relative? Location?	<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CHECK SCHEDULE AVAILABILITY							
Type of employment desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal Date Available for work _____							
NOTE : Work schedules are based on the needs of the business and are subject to change.							
Hours Available:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
FROM	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any
TO	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m. <input type="checkbox"/> any

How did you learn about the company? <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Radio Ad <input type="checkbox"/> Friend/Relative <input type="checkbox"/> Walk In <input type="checkbox"/> Job Fair <input type="checkbox"/> Website <input type="checkbox"/> Employment Agency <input type="checkbox"/> Other
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SKILLS
Check if you can do any of the following: <input type="checkbox"/> Calculator <input type="checkbox"/> Word Processing _____ Lotus Word Pro _____ MS Word <input type="checkbox"/> Spreadsheets _____ Excel _____ Lotus 1-2-3 <input type="checkbox"/> Typewriter _____ wpm <input type="checkbox"/> Other _____
Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform the job related functions in the position for which you are applying. _____

PROFESSIONAL REFERENCES			
NAME	TELEPHONE	OCCUPATION	# of Years Known
	()		
	()		
	()		

EDUCATIONAL BACKGROUND			
NAME AND LOCATION	MAJOR	GRADUATED?	DEGREE
HIGH SCHOOL		<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE		<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER		<input type="checkbox"/> Yes <input type="checkbox"/> No	

MILITARY SERVICE	BRANCH	RANK	DATES OF SERVICE
<input type="checkbox"/> Yes <input type="checkbox"/> No			

EMPLOYMENT HISTORY		
DATES OF EMPLOYMENT: FROM _____ TO _____ POSITION _____ IMMEDIATE SUPERVISOR AND TITLE _____	EMPLOYER _____ ADDRESS _____ CITY, STATE, ZIP _____ TELEPHONE () _____ MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	SALARY : START \$ _____ END \$ _____ REASON FOR LEAVING? _____
DATES OF EMPLOYMENT: FROM _____ TO _____ POSITION _____ IMMEDIATE SUPERVISOR AND TITLE _____	EMPLOYER _____ ADDRESS _____ CITY, STATE, ZIP _____ TELEPHONE () _____ MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	SALARY : START \$ _____ END \$ _____ REASON FOR LEAVING? _____
DATES OF EMPLOYMENT: FROM _____ TO _____ POSITION _____ IMMEDIATE SUPERVISOR AND TITLE _____	EMPLOYER _____ ADDRESS _____ CITY, STATE, ZIP _____ TELEPHONE () _____ MAY WE CONTACT? <input type="checkbox"/> Yes <input type="checkbox"/> No	SALARY : START \$ _____ END \$ _____ REASON FOR LEAVING? _____

ATTENDANCE AND PUNCTUALITY INFORMATION
Consistent attendance and punctuality are essential requirements of every job with this company. Is there anything which would interfere with your regular attendance and punctuality if you are offered a job with the Company? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Please Explain _____

APPLICANT'S STATEMENT
<p>I authorize, without reservation, any party or agency contacted by this employer or its agents to furnish any of the above mentioned information or any other information requested. I understand that misrepresentation or omission of facts called for is a cause for dismissal. I understand that as a condition of employment, I may be required to take such medical examinations as may be required by this company or any of its divisions, including drug or alcohol screening. I understand that this 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. Further, I understand and agree that my employment is at will and for no definite period and may be terminated at any time with or without cause upon notice. I understand that any employment by this company will be on a 30 day introductory basis.</p> <p>Signature of Applicant _____ Date _____</p>